

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

5/

FILED
Jun 12, 2006 8:00 am
Secretary of State

05-02-2006 90213 009 ***150.00

DOCUMENT # P04000120335

1. Entity Name
HARDEN, INC.



Principal Place of Business
**405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

Mailing Address
**405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

66018387



DO NOT WRITE IN THIS SPACE

04102006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1566529

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HARDEN, THURMAN L
405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Thurman L. Harden

4-16-06

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
HARDEN, THURMAN L
405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VT
HARDEN, ELAINE
405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
HARDEN, LUCAS
405 DRIFTWOOD AVE.
MELBOURNE BEACH, FL 32951**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thurman L. Harden **THURMAN L. HARDEN**

5-8-06

321-626-7621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

Daytime Phone #