# **2008 FOR PROFIT CORPORATION**

DO NOT WRITE IN THIS SPACE

#### **ANNUAL REPORT DOCUMENT # P05000122609** 1. Entity Name HARLEY BEARS DEN. INC.

Principal Place of Business

5993 HIGHWAY 99 MOLINO, FL 32577 US Mailing Address

5993 HIGHWAY 99

MOLINO, FL 32577 US

**FILED** Sep 12, 2008 08:00 AM Secretary of State



07192008

No Chg-P

CR2E034 (11/05)

4. FEI Number

20-3427912

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SUPPLEE, BLAIR C 5993 HIGHWAY 99 MOLINO, FL 32577

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<ol><li>The above named entity submits this statement for the purpose of changing its registered office or</li></ol>	r registered agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent.	09/12/08-80004-005 150.00
	09/12/08-2008-150.ns

SIGNATURE

Signature, typed or printed name of regulatered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE 18 \$150.00 Due by September 12, 2008 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

#### OFFICERS AND DIRECTORS 10. TITLE SUPPLEE, BLAIR C NAME STREET ADORESS **5993 HIGHWAY 99** CITY-ST-ZIP **MOLINO, FL 32577** TITLE SUPPLEE, SUZANNE M NAME STREET ADDRESS **5993 HIGHWAY 99** CITY-ST-ZIP MOLINO, FL 32577 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITS F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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.

CICMATUDE.