2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P06000085163 1. Entity Name HARDING ENTERPRISES, INC. Principal Place of Business 2000 WARRINGTON WAY, SUITE 163 LOUISVILLE, KY 40222 Mailing Address 2000 WARRINGTON WAY, SUITE 163 LOUISVILLE, KY 40222

FILED Jan 14, 2008 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN THIS	SPACE
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01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1184778 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

502-561-0070

6. Name and Address of Current Registered Agent

FALK, JR., JACK A DUNWOODY WHITE & LANDON, P.A. 550 BILTMORE WAY, SUITE 810 CORAL GABLES, FL 33134

the obligations of registered agent.

SIGNATURE:

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SIGNATURE								
о учению, нуков их речевы карих акция и корисавов. (чел се парравания принадания вершения может нападанд). — ——————————————————————————————————								
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign F Trust Fund Contribut			ncing	\$5.00 May Be 1 Added to Fees				
10.	OFFICERS AND DIRE	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GHEE, JOHN 1898 SE PORT ST LUCIE BLVD PORT ST LUCIE, FL 34952							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MURR, ANTHONY W 2000 WARRINGTON WAY SUITE 16: LOUISVILLE, KY 40222	3			U00000782293 01/15/08-80068-015 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			} 	in '	THIS SPACE			
TITLE Name Street address City-St-21P								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
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 path; 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.								

TED NAME OF SIGNING OFFICER OR DIRECTOR

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