

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000021208

FILED
Feb 18, 2009
Secretary of State

Entity Name: HARKINS MANAGEMENT COMPANY

Current Principal Place of Business:

3525 W. LAKE MARY BLVD., SUITE 306
LAKE MARY, FL 327463461

New Principal Place of Business:

707 MONROE STREET
SANFORD, FL 327718816

Current Mailing Address:

3525 W. LAKE MARY BLVD., SUITE 306
LAKE MARY, FL 327463461

New Mailing Address:

707 MONROE STREET
SANFORD, FL 327718816

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARKINS, C. WILLIAM
3525 W. LAKE MARY BLVD., SUITE 306
LAKE MARY, FL 327463461 US

Name and Address of New Registered Agent:

HARKINS, C. WILLIAM
707 MONROE STREET
SANFORD, FL 327718816 US

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.

SIGNATURE:

02/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARKINS, C. WILLIAM
Address: 3525 W. LAKE MARY BLVD., SUITE 306
City-St-Zip: LAKE MARY, FL 327463461

Title: D () Delete
Name: HARKINS, MATTHEW W
Address: 3525 W. LAKE MARY BLVD., SUITE 306
City-St-Zip: LAKE MARY, FL 327463461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARKINS, C. WILLIAM
Address: 707 MONROE STREET
City-St-Zip: SANFORD, FL 327718816

Title: D (X) Change () Addition
Name: HARKINS, MATTHEW W
Address: 707 MONROE STREET
City-St-Zip: SANFORD, FL 327718816

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. WILLIAM HARKINS

D

02/18/2009

Electronic Signature of Signing Officer or Director

Date