

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000085228

1. Entity Name

H. HARRIS INVESTMENTS, INC.

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90012 034 ***150.00

Principal Place of Business

6101 S. RIDGE RD.
MILTON FL 32570

Mailing Address

6101 S. RIDGE RD.
MILTON FL 32583-2914

2. Principal Place of Business

7345 Shields PT. Rd.

Suite, Apt. #, etc.

3. Mailing Address

7345 Shields PT. Rd.

Suite, Apt. #, etc.

City & State

MILTON FL.

City & State

MILTON, FL.

Zip

32583

Country

U.S.A.

Zip

32583

Country

U.S.A.

4. FEI Number

59-3215566

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WESTMORELAND, J. LOFTON
220 W. GARDEN ST.
9TH FLOOR
PENSACOLA FL 32501

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRIS, HARRY C 6101 S. RIDGE RD. MILTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARRIS, LINDA G 6101 S. RIDGE RD. MILTON FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRIS, HARRY C. 7345 Shields PT. Rd. MILTON, FL. 32583	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARRIS, LINDA G. 7345 Shields PT. Rd. MILTON, FL. 32583	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda G. Harris* **LINDA G. HARRIS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-00

Date

(850) 626-4814

Daytime Phone #

CR2E034 (9/99)