FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400067509 (7)

HARTE MOTOR CAR COMPANY

Principal Place of Business Mailing Address

715 8. COLLINS ST 715 S. COLLINSL ST.
PLANT CITY FL 33566

PLANT CITY FL 33566-5515

FILED May 06 1997 8:00am Secretary of State



PLANT CITY FL	33566	PLANT CITY FL 33566-5 US	51 5						
US		us			09/14/1994 04/30			of Last Report /1996	
2. Principal Pla	ace of Business	2a. Mailing Address	·		4. FEI Number	4	T A	Applied For	
21		26			59-3267146		I N	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 24	Country 25	Zip 29	Coun	try	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curre	ent Registered Agent		·	10. Name and Address of New Re-	gistered A	gent		
HAR 3910 JAM	TE, CHARLES R I WEST ALVA ST. 716 P PA FL 33614 7033 Plant	South Collans St. + City FL 83566	1	Name Street A	ddress (P.O. Box Number is Not Acceptab	le)			
				34 City		FL.	85 Zip	Code	
office or re agent. I an	o the provisions of Sections 607.05 ogistered agent, or both, in the State familiar with, and accept the obli	602 and 607.1508, Florida Stat te of Florida Such change was gations of, Section 607.0505, I	utes, the abo authorized Florida Statu	ove-named o by the corpo tes.	orporation submits this statement for the p oration's board of directors. I hereby accep	urpose of out the appo	changing intment a	its registered s registered	
SIGNATURE :	Signature, typed or printed name of registered a	gont and title if applicable. (No	OTE: Registered	Agent signature re	equired when reinstating)	DATE.			
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	D	☐ DECETE	1.1 101	F			Change	Addition	
NAME STREET ADORESS	HARTE, CHARLES R 715 S. COLLINS ST.		1.2 NAM 1.3 STR	ME EE1 ADDRESS					
CITY-ST-ZIP	PLANT CITY FL			/-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITE	F		l	Change	[_] Addition	
NAME	CRIBBS, SANDORAS		2.2 NAM	AC					
STREET ADDRESS	715 S COLLINS ST		2.3 \$18	EET ADDRESS					
CITY-ST-ZIP	PLANT CITY FL		2 # CIT	Y-ST-71P					
TITLE	D	DELETE	3.1 1171	E		i	☐ Change	Addition	
NAME	HARTE, BRIAN J		3.2 NA	#f					
STREET ADDRESS	715 S. COLLINS ST.		3.3 STR	EET ADDRESS					
CITY-ST-ZIP	PLANT CITY FL		3.4. CIT	Y-ST-ZIP					
TITLE	D	DELETE	4.1 7(7)	E			Change	Addition	
NAME	HARTE, JULIE A		4. 2 NA	WE					
STREET ADDRESS	715 S. COLLINS ST.		4.3 STR	EET ADDRESS					
CITY-ST-ZIP	PLANT CITY FL		4.4 CIT	Y-ST-ZIP					
TITLE		DELETE	5.1 TJTL				Change	Addition	
NAME		•	5.2 NAM	AE					
STREET ADDRESS			53 SIR	EFT ADDRESS					
CITY-ST-ZIP				(-\$1-ZIP					
TITLE		DELETE	61 1/1				Change	Addition	
NAME		F >	6.2 NAM	1		•		L-1 / 100m-011	
1									
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP	ou cartify that the information cumple	and with this filing does not are		(-S1-ZIP	ated in Section 110 07/3/ii) Florida Statuto	a 1 f. usb - ::	and the state		

I do 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or open altachment with an address