2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2004 8:00 am
Secretary of State
07-27-2004 90036 011 ***150.00

DOCUMENT # P94000069758

1. Entity Name
ROGER & ROBERTA HARVEY ENTERPRISES INC.

Principal Place of Business	Mailing Address
2717 WOODVIEW COURT CLEARWATER, FL 34621	2717 WOODVIEW COURT CLEARWATER, FL 34621

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07232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0521633
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARVEY, ROGER A
2717 WOODVIEW COURT
CLEARWATER, FL 34621

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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 the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title, if applicable. (REQUIRED: Registered Agent signature required when submitting)

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HARVEY, ROGER A
STREET ADDRESS	2717 WOODVIEW COURT
CITY-ST-ZIP	CLEARWATER, FL 34621
TITLE	D
NAME	HARVEY, ROBERTA S
STREET ADDRESS	2717 WOODVIEW COURT
CITY-ST-ZIP	CLEARWATER, FL 34621
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roberta S Harvey 7/23/04 727-793-0041
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

I did not file this earlier because I did not think I had received a form and did not know the form had been sent until my accountant advised it to me.