

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002708 (2)

1. Corporation Name

HARBOR STAMPS, INC.



Principal Place of Business

2409 SUNNYSIDE ST.
SARASOTA FL 34239

Mailing Address

2409 SUNNYSIDE ST.
SARASOTA FL 34239

3. Date Incorporated or Qualified

01/09/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, JOYCE A
2409 SUNNYSIDE ST.
SARASOTA FL 34239

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 637.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was and only if the corporation's board of directors (hereby) accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 637.0503, Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of New Registered Agent)

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
☐ Change ☒ Addition	P. Joyce A. Williams	2409 Sunnyside St.	Sarasota FL 34239
☐ Change ☒ Addition	V Gene F. Williams	2409 Sunnyside St.	Sarasota FL 34239
☐ Change ☒ Addition	T/S Vicky L. Knecht	2409 Sunnyside St.	Sarasota FL 34239
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply with the exemption state in Section 119.07(3)(a), 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 trustee or person 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 on an attachment with an address.

SIGNATURE:

Vicky L. Knecht

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 941-255-3347

CR2E034 (12/95)