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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000027951**1. Corporation Name

HARP HOLDING COMPANY, INC.

Principal Place of Business

Mailing Address

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90021 047 ***150.00



MELBOURNE FL 32901			MELBOURNE FL 32901				DO NOT WE	ITE IN THE OD	VCE	
						<u> </u>		ITE IN THIS SPA		
							Incorporated or Qualifed			
							<u>)5/1995 </u>			
2. Principal Place of Business			2a. Mailing Address			4. FEI N				ed For
21		26	26			59-3	3307632		No	Applicable
Suite, Apt. #, etc.		—	Suite, Apt. #, etc.			5. Certif	cate of Status Desired		8.75 A	ciditional quired
22		27								
City & S ate			City & State			ion Campaign Financing		\$5.00		
23		28				Fund Contribution		Added t	rees	
Zip	Country		Zip Country			corporation owes the cur			[]No	
24	25			30			onal Property Tax.		Yes	- 1 <u>1100</u>
	9. Name and Add ess of	Current Regist	ered Agent			10. Nam	e and Address of New	Registere 3 Age	nt	
				8	1 Name					
EVANS, ARTHUR F III			82 Street Ad		Address (P.O. B	ox Number is Not Accept	able)			
1688 W. HIBISCUS BLVD.						1000 (7.0.0	***	•		
MELBOURNE FL 32901				8	3					
				8	4 City				5 Zip (Code
					' '			FL;		
office or re	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	e State or Florida	a.Such change was a	iutnorizea b	y tne corpo	corporation subr pretion's board o	nits this statement for the f cirectors. I hereby acce	purpose of cha pt the appointment	nging its ent as re	r-∌gistered gistered
SIGNATURE		-								
SIGNATURE	Signature, typed or printed name of regis	tered agent and title if	applicable (NOT)	: Registered Ag	ent signature re	equ red when reinstatin		DATE		
12.	OFFICE	RS AND DIREC	CTORS	13.			ICNS/CHANGES TO OF			
TITLE	-D		☐ DELETE	1.1 TITLE		PRESI	DENT	<i>)</i> ×	Change	☐ Addition
NAME	evans, arthur f III			1.2 NAME	:			•		
STREET ADDRESS	1688 W. HIBISCUS BLVI) .		1.3 STRE	ET ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32901			1.4 CITY-	ST-ZIP				<u> </u>	
TITLE	-D		OELETE	2.1 TITLE		VICE P	KESIDENT)X	Change	☐ Addition
NAME	Evans, hugh M Jr.			2.2 NAME				,		
STREET ADORE 3S	1688 W. HIBISCUS BLVI	D.		2.3 STRE	ET ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32901			2. 4 CITY	-ST-ZIP					
TITLE			☐ DELETE	3.1 TITLE			•		Change	☐ Addition
NAME				3.2 NAME	:					
STREET ADORE 3S				33 STRE	ET ADDRESS					
CITY-ST-ZIP				34 CITY	-ST-ZIP					
TITLE			☐ DELETE	4.1 TITLE					Change	Addition
NAME				4, 2 NAM	E					
STREET ADDRE 3S				4 3 STRE	ET ADDRESS					
CITY-ST-ZIP				4.4 CITY-	ST-ZIP					
TITLE			☐ DELETE	5.1 TITLE	The state of the s				Change	☐ Addition
NAME				5.2 NAME	-					
STREET ADDRE 3S				53STRE	ET ADORESS					
CITY-ST-ZIP				5.4 CITY-						
TITLE			☐ DELETE	6.1 TITLE					Change	Addition
NAME				6.2 NAME						
STREET ADDRE 3S				6.3 STRE	ET ADDRESS					
CITY-ST-ZIP		1 -		6.4 CITY	ST-ZIP					

14. I hereby certify that the informat on supplied vitit this filling 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 redeiter or trustee 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, with all other like empowered.

SIGNATURE: