

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000036644

Entity Name: E.L. HARRISON, INC.

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1201 AUSTRALIAN AVE.  
FT. PIERCE, FL 34982

## **New Principal Place of Business:**

1201 AUSTRALIAN AVE.  
FT. PIERCE, FL 34982 US

## **Current Mailing Address:**

P.O. BOX 12388  
FT. PIERCE, FL 34979 US

## **New Mailing Address:**

FEI Number: 65-0579634      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

HARRISON, EDWARD L  
1201 AUSTRALIAN AVE.  
FT. PIERCE, FL 34982 US

## **Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: PTD  
Name: HARRISON, EDWARD L  
Address: 1201 AUSTRALIAN AVENUE  
City-St-Zip: FT PIERCE, FL 34982 US

Title: VP  
Name: HARRISON, GRACE M  
Address: 1201 AUSTRALIAN AVENUE  
City-St-Zip: FORT PIERCE, FL 34982 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD L HARRISON

PTD

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date