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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000037690 (1)

HARRIS DEVELOPMENTS, INC.

FILED Apr 28 1998 8:00am Secretary of State



Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc.	1	6 Of D03#1035	Walling Address							
2. Principal Place of Business							ļ			
2. Principal Place of Business 2a. Mailing Address 4. File Names 5.509/1995 5.59312337 Acquised for Sulface April 9. etc. 27 5.016, April 9. etc. 28 5.59312337 5. Certificate of Status Desired 58.75 Additional Personal Property Text Address 5.000 May De Address 5.	ETHN HAVER	FL 32444	LYNN HAVEN FL 324	444			DO NOT WRITE IN THIS	SPAC	E	
2. Principal Pluce of Business 2a. Malling Address 4. FEI Number Aspliad For S9-3312337 Rich Applied For S9-331237 Rich Applie										
2. Principal Place of Business 2a. Maining Address 4. FET Number Applied For Sp3312337 Next Applied For Sp331237 Next Applied F	i						05/00/1005			
Suite, Apt #, etc Suite,	2. Principal P	lace of Business	2a. Mailing Address			 -			A	oplied For
Suite, Apt #, etc Suite,	21		26	 			59-3312337	Not Applicable		
City & State City & Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip City & State City City & City City & City City & Cit				****				\$8.75 Additional		
28 29 29 20 20 30 50 50 50 50 50 50 5	_						5. Certificate of Status Desired			
23		е	City & State				6. Election Campaign Financing	\$	5.00	May Be
Zop	23		28							
9. Name and Address of Current Registered Agent HARRIS, ROBERT 1715 MAINE AVENUE LYNN HAVEN R. 32444 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere of thick or registered agent or both. In the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere of the origination of Scotion of Or.0505, Princia Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 14. Thirtie 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Thirtie 17. ADDITIONS/CHANGES TO OFFICERS AND D		Country	Zip	Coun	try		8. This corporation owes or has paid the cur	rent y	ear In	tangible
HARRIS, ROBERT 1715 MAINE AVENUE LYNN HAVEN FL 32444 82 Street Address (P.C. Box Number is Not Acceptable) 83	24	25	29	30			Personal Property Tax due June 30.	Yes] No
1715 MANE AVENUE LYNN HAVEN FL 32444 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 86 City FL 86 Zip Code 87 City FL 88 Zip Code 88 City FL 88 Zip Code 98 City FL 98 Zip Code 98 City FL 98 Zip Code 98		9. Name and Address of Curre	ant Registered Agent				10. Name and Address of New Registered	Agent		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent, or both appointment as registere agent, and the purpose of changing its registere agent. SIGNATURE 12.	H/A	vrris. Robert		8	31	Name				
LYNN HAVEN FL 32444 B3 B4 City					12	Street Add	tress (P.O. Roy Number is Not Acceptable)			
State Appendix A				}~	-	Direct Add	diess (1.0. dox number is not Acceptable)			
TILE DELETE DELETE				Ē	33					
TILE DELETE DELETE				ļ.,		O'the c		1		01-
The provisions of Sections 607 5022 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, in am familiar with, and accept the obligations of, Socion 607,6905, Florida Statutes. SIGNATURE				is.	54	City	FI	85	Zip	Code
SIGNATURE	11. Pursuant	to the provisions of Sections 607.05	502 and 607 1508 Florida St	atutes the abo)VA	-named cor		f chan	aina i	s registered
SIGNATURE Signature, hyped or prevent name of inequatered agent and sinn if applicatable NOTE Requisited Agent argunute requised when retrostation) DATE	office or re	egistered agent, or both, in the Stal	te of Florida. Such change w	as authorized	by	the corpora	ation's board of directors. I hereby accept the app	ointm	ent as	registered
Signature, typed or president name of legislated agent and later it applications (NOTE Regislated Agent growther insistation)	,	m familiar with, and accept the obli	gations of, Section 607.0505	, Florida Statui	les	le .				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 12 12 12 14 12 14 14	SIGNATURE	Signature broad of Printed carrie of techniques	posts and bild if publicable	(NOTE Posisiered	400	ot cionature regi	(ired when reinstation) DATE			
TITLE					100	in the source redu		DIRE	CTOF	RS IN 12
NAME HARRIS, ROBERT 12 NAME 13 STREET ADDRESS 13 STREET ADDRESS 14 CITY - 51 - 2IP	TITLE			1.1 TiTL	E					Addition
1715 MAINE AVENUE 13 STRET ADDRESS 14 CITY-ST-ZIP	NAME I	• •		12 NAM	eF.	}			-	
CITY-SI-ZIP				1		Anneess				
DELETE	l 1					1				
NAME			DELETE			-20		TTC	iange	Addition
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	1		 -			Ì				
CITY-\$1-ZIP						ATMORECC				
TITLE										
NAME			DELETE			1-ZIF		T di	ange	Addition
STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 3.4. CITY-ST-ZIP	! [OLLIN						yv	
CITY-ST-ZIP DELETE 4.1 TITLE Change Addit	1 1					ADDRESS				
TITLE DELETE 4.1 TITLE Change Addit NAME 4.2 NAME 4.2 NAME CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addit CITY-ST-ZIP DELETE 5.1 TITLE Change Addit NAME 5.2 NAME 5.2 NAME STREET ADDRESS CITY-ST-ZIP Change Addit TITLE DELETE 6.1 TITLE Change Addit NAME 6.2 NAME Addit Addit	1 1									
NAME			☐ necere			1-214		Tr	nance	Addition
STREET ADDRESS				1				— 0	earige	A00(10)
CITY-ST-ZIP						*DDDCCC				
TITLE DELETE 51 TITLE Change Addit NAME 52 NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addit NAME 62 NAME Addit	l · · · · l									
NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addit NAME 62 NAME			DELETE			- ZIP			-	Addition
STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZIP TITLE DELETE 6.1 TITLE Change Addit NAME 62 NAME			FT DECEME					ᆜᅜ	ខេត្តពិព	L. ADDITION
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addit NAME 62 NAME Change Addit	1 1									
TITLE DELETE 6.1 TITLE Change Addit NAME 62 NAME						ľ				
NAME 62 NAME			T pri-ve		_	-ZIP		<u> </u>		F 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
			☐ DETEIF			-		LJ CI	ange	L ADDITION
STREET ADDRESS 63 STREET ADDRESS	I			6.2 NAM	E	İ				
	STREET ADDRESS			6.3 STRE	ET /	ADDRESS				
CITY-ST-ZIP 6.4 CITY-ST-ZIP 4.4 Thereby end is that the Information appelled with this filling does not explicit for the exemption stated in Cooling 140 O7(2)VI). Florido Creation Little and the Information applied to the Cooling 140 O7(2)VI). Florido Creation Little and the Information applied to the Cooling 140 O7(2)VI). Florido Creation 140 O7(2)VIII.				6.4 CITY	-ST					

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 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:

(850)265-4174