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FILED

Feb 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000080448 (9)

1. Corporation Name

CURT L. HARBSMEIER, P.A.

Principal Place of Business

~~610 LAKE HARRIS DR~~
~~LAKELAND FL 33813~~
~~US~~

Mailing Address

POST OFFICE BOX 6455
LAKELAND FL 33807



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	5120 South Lakeland Dr.,	26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22	Suite 3	27	
City & State		City & State	
23	Lakeland, FL	28	
Zip	Country	Zip	Country
24	33813	25	U.S.
29		30	

3. Date Incorporated or Qualified

09/26/1996

4. FEI Number

59-3398014

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HARBSMEIER, CURT L
~~210 LAKE HARRIS DR~~
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81	Name	Harbsmeier, Curt L.	
82	Street Address (P.O. Box Number is Not Acceptable)	5120 South Lakeland Dr.,	
83		Suite 3	
84	City	Lakeland	FL
85	Zip Code	33813	

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 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	HARBSMEIER, CURT	1.2 NAME	
STREET ADDRESS	210 LAKE HARRIS DR	1.3 STREET ADDRESS	5120 South Lakeland Drive, Ste. 3
CITY-ST-ZIP	LAKELAND FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: Curt L. Harbsmeier, PRESIDENT 2-2-98 (941) 619-7330

CR2E034 (1097)