

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011331

Entity Name: HARLANCORP INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

104 PARK TRACE BLVD
OSPREY, FL 34229 US

New Principal Place of Business:

1108 BREWER PL
SARASOTA, FL 34236 US

Current Mailing Address:

104 PARK TRACE BLVD
OSPREY, FL 34229 US

New Mailing Address:

1108 BREWER PL
SARASOTA, FL 34236 US

FEI Number: 65-0741023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARLAN, DAVID A
104 PARK TRACE BLVD
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

HARLAN, DAVID A
1108 BREWER PL
SARASOTA, FL 34236 US

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:

01/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARLAN, DAVID A
Address: 104 PARK TRACE BLVD
City-St-Zip: OSPREY, FL 34229

Title: S () Delete
Name: VALE, KEVIN R
Address: 104 PARK TRACE BLVD
City-St-Zip: OSPREY, FL 34229

Title: O (X) Delete
Name: MAKOWSKI, MARLENE
Address: 825 S OSPERY #201
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARLAN, DAVID A
Address: 1108 BREWER PL
City-St-Zip: SARASOTA, FL 34236

Title: VP (X) Change () Addition
Name: VALE, KEVIN R
Address: 1108 BREWER PL
City-St-Zip: SARASOTA, FL 34236

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID A. HARLAN

P

01/05/2005

Electronic Signature of Signing Officer or Director

Date