

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000047406 1. Entity Name HARRINGTON RESOURCES, INC.																																																																																																																	
Principal Place of Business 1610 RIO COVE CT ORLANDO FL 32825				Mailing Address 1610 RIO COVE CT ORLANDO FL 32825																																																																																																													
2. Principal Place of Business 1610 RIO COVE CT - Suite, Apt. #, etc.		3. Mailing Address SAME Suite, Apt. #, etc.																																																																																																															
City & State ORLANDO		City & State		4. FEI Number 59-3457804																																																																																																													
Zip FL		Country ORANGE		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																													
Zip 32825		Country		Applied For Not Applicable																																																																																																													
6. Name and Address of Current Registered Agent HARRINGTON, LYNDA 1610 RIO COVE CT. ORLANDO FL 32825				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																													
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)																																																																																																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Added to Fee																																																																																																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PDT</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARRINGTON, LYNDA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1610 RIO COVE CT</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>ORLANDO FL 32825</td> <td></td> </tr> <tr> <td>TITLE</td> <td>DVS</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>HARRINGTON, PARKER</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1610 RIO COVE CT</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>ORLANDO FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 10%; text-align: right;">☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	PDT	☐ Delete	NAME	HARRINGTON, LYNDA		STREET ADDRESS	1610 RIO COVE CT		CITY- ST- ZIP	ORLANDO FL 32825		TITLE	DVS	☐ Delete	NAME	HARRINGTON, PARKER		STREET ADDRESS	1610 RIO COVE CT		CITY- ST- ZIP	ORLANDO FL		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE		☐ Change ☐ Add	NAME			STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lynda Harrington* **LYNDA HARRINGTON** **4/10/06**