

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

0459128

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000075736**

1. Corporation Name

HARLEY-DAVIDSON OF NAPLES, INC.

Principal Place of Business

**5707 SHIRLEY STREET
NAPLES FL 34109**

Mailing Address

**5707 SHIRLEY STREET
NAPLES FL 34109**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt #, etc.

26

Suite, Apt #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**FISCHER, J. SCOTT
1870 CLAYTON STREET
FORT MYERS FL 33907**

81 Name

**J. SCOTT FISCHER
1870 CLAYTON COURT**

83

84 City

Ft MYERS

FL

85 Zip Code

33907

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation hereby certifies 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. The change is signed by the approprate 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, if applicable,

(NOTE: Registered Agent changes require a new filing fee.)

(NOTE)

12. OFFICERS AND DIRECTORS

TITLE [] DELETE

**P
FISCHER, J. SCOTT
1870 CLAYTON STREET
FT. MYERS FL 33907**

TITLE [X] DELETE

**VPS
FISCHER, MARY
1870 CLAYTON STREET
FORT MYERS FL 33907**

TITLE [] DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE [] DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE [] DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE [] DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

**P
FISCHER, J. SCOTT
1870 CLAYTON COURT**

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

[X] Change [] Addition

[] Change [X] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day Month Year

FILED

99 MAR 29 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1997

4. FET Number

65-0782880

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 the current year Intangible Personal Property Tax

[X] Yes [] No

10. Name and Address of New Registered Agent

CR2E034 (11/98)