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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90111 050 ***150.00

FILED

1999

DOCUMENT # P98000070613 WES & LARRY HARLOFF INC.

Principal Place of Business Mailing Address 2720 27TH AVENUE DRIVE WEST 2720 27TH AVENUE DRIVE WEST **BRADENTON FL 34205 BRADENTON FL 34205** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/12/1998 4. FEI Nurnber 2a. Mailing Address Applied For 2. Principal Place of Business 65-0856260 Not Applicable 26 21 \$8.75 Ad titional Suite, Apt. #, etc. Suite Apt. #. etc. 5. Certifca e of Status Desired \Box Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation owes the current year Intangible Count v Zip Zip E Kio ☐ Yes Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 82 1201 HAYS STREET TALLAHASSEE FL 32301-2525 83 Zip Ccde 84 85 City 11. Pursuart to the provisions of Sections 607.0502 and 607.1508, Florida Statutiss, the above-named corporation submits this statement for the purpose of changing its 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 requi ed when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS / ND DIRECTORS IN 12 13. 12. D President Addition Change □ DELETE 1.1 TITLE TITI F HARLOFF, EVELYN F 1.2 NAME NAME 2720 27TH AVENUE DRIVE WEST STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34205** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 31 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4 1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE

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 each; that Lam 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.

5.2 NAME 5.3 STREET ADDRESS

62 NAME

54 CITY-ST-7IP

6.3 STREET ADDRESS

6 4 CITY-ST-ZIF

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

4-26-99 941-756-9208 Date Date Dayline Phone #

Change

☐ Addition

(11/98)

CR2E034