FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Secretary of State
Tallahassee, Florida
Corporation Division

APPROVED
AND
FILED

95 APR 1 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S10499 (9)

1. Corporate Name
HARRINGTON CONSULTANTS, INC.

Principal Office Address
525 VERA CRUZ
DESTIN FL 32541

Mailing Address
525 VERA CRUZ
DESTIN FL 32541

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (Established) 11/02/1990

3a. Date of Last Report 07/01/1994

2. Previous Corporate Name
21

2a. Mailing Address
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Date Adopted
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Date Adopted
27

Date Adopted
23

Date Adopted
28

24 25 29 30

4. FEI Number 59-3035276
Applied For
Not Applicable

5. Certificate of State Owned [ ] $8.75 Additional Fee Required

6. Filing for Campaign Financing (Chapter 106) [ ] $5.00 May Be Added to Fees

8. This corporation has activity for interstate commerce under S. 607.0193 Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

NEWMAN, RAYMOND F., JR.
150 EGLIN PKWY NE
FT. WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0501, 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. The corporation is aware that any net effect of such changes may affect its status as a registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.

SIGNATURE

12. ADDITIONAL OFFICERS, DIRECTORS

D
HARRINGTON, CECIL F.
525 VERA CRUZ
DESTIN FL

13. ADDITIONS, CHANGES, TERMINATIONS (Attach Sheet if Needed)

[✓] Add [ ] Amend

P/D
HARRINGTON, CECIL F
525 VERA CRUZ
DESTIN FL 32541

14. I hereby certify that the facts stated herein are true. I understand that false statements made pursuant to this report are subject to the penalties provided for in Section 817.155, Florida Statutes. I hereby resign as registered agent if I have signed above as the registered agent. I am familiar with and accept the duties and obligations of a registered agent under Florida Statutes.

SIGNATURE: Cecil F Harrington Jr
SIGNATURE AND TYPE OR PRINT NAME OF AUTHORIZED OFFICER OR DIRECTOR

April 29, 1995 904 474 1901

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