

FILE NOW: FILING FEE AFTER MAY 1, IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Harney Inc **572373**
~~DBA~~

Principal Place of Business

Mailing Address

*3221 S. Atlantic Ave
Daytona Beach Shores, FL*

2. Principal Place of Business

2a. Mailing Address

21 *Beach House Motel*

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 *3221 S. Atlantic Ave*

27

City & State

City & State

23 *Daytona Beach Shores*

28

Zip

Zip

24 *32118*

25

Country

Country

25 *Delusia*

29

Zip

Zip

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

4. FEI Number

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 has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. 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 of agent or person named as registered agent and title (if applicable)

Signature of Registered Agent (if not the same person as the registered agent)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<i>Pres/Sec</i>	☐ DELETE
NAME	<i>Barbara A Welsh</i>	
STREET ADDRESS	<i>3221 S. Atlantic Ave</i>	
CITY, ST, ZIP	<i>Daytona Beach Shores FL 32118</i>	
TITLE	<i>V. Pres/Fin.</i>	☐ DELETE
NAME	<i>Patrick T Welsh</i>	
STREET ADDRESS	<i>3221 S. Atlantic Ave</i>	
CITY, ST, ZIP	<i>Daytona Beach Shores FL 32118</i>	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	

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-03/22/96--01019-030
*****200.00**

3-21

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barbara A Welsh

3/15/96

904-788-7107

CR2E034 (12/95)