## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 13, 2002 8:00 am Secretary of State

DOCUMENT# 5838	324
1. Entity Name Harrington	

The Harrington Group, INC.			05-13-2002 90167 050 ***150.00
DO NOT WRITE	IN THIS S	PACE	
2. Principal Place of Business Under 21/1 K	3. Mailing Address	Under Lill Re	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	,	DO NOT WRITE IN THIS SPACE
ONIAND FL	ONUND.	Je .	4. FEI Number 3088 780 Applied For Not Applicable
32825 Ordase	32825	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
DO NOT W	RITE		7. Name and Address of Current Registered Agent  Crin Try Richard 6.  IS (20. Bex Number is Not Acceptable)
IN THIS SP	ACE		SILARE UNDENNILIG
		City (Or	1226 FL Zip Code 32825
8. The above named entity submits this statement for SIGNATURE Light C. Harring Signature, typed or printed name of registered agent as	ndon CEO	s registered office or regist	J Han 1 4/23/62
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After May Amende Make Check Paya	May 1 Fee is \$150.00 / 1, Fee is \$550.00 od UBR is \$61.25 ble to Department of Si	10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP  OFFICERS AND C  Richard 6. Harr  11561 Like Under	in ctory	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS 11501 Like Under CITY-ST-ZIP Bridges, FL 3	hill RL 2825	TITLE NAME STREET ADDRESS CITY-S1-ZIP	DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP	
13. I hereby certify that the information supplied with th	is filing does not qualify for	the exemption stated in Se	ection 119.07(3)(i), Florida Statutes. I further certify that the information

13 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 attachment with an address, with all other like empowered.