2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V08687

Name:

Title:

Name:

Address:

City-St-Zip:

Address: City-St-Zip: HARDIMAN, CHARLES J

HARDIMAN, THOMAS O

26A CHESTNUT ST

ORLANDO, FL

POTSDAM, NY

5801 N APOPKA-VINELAN

() Delete

FILED Feb 21, 2005 Secretary of State

Entity Nan	ne: HARD	IMAN BRO	THERS, INC.					
Current Principal Place of Business:				New Prince	New Principal Place of Business:			
5787 N APO ORLANDO								
Current Mailing Address:				New Maili	ng Addres	ss:		
5787 N APO ORLANDO								
FEI Number:	59-3238388	FEI Nui	mber Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
JOHNSON 425 SOUTH WINTER G	H DILLARD		US					
The above in the State		ity submits t	his statement for the pu	rpose of changing	its registere	ed office or registered agent, or both,		
SIGNATUR	E:							
	Elect	ronic Signa	ture of Registered Ager	nt		Date		
Election Carr	paign Finan	cing Trust Fu	nd Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VC HARDIMAN, 11729 PINE ORLANDO,			Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:		PKA-VINELA	N	Title: Name: Address: City-St-Zip:	5787 N AP	(X) Change()Addition I, JOSEPH J OPKA-VINELAN , FL 32818		
Title:	D	() Doloto		Title:	D	(Y) Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

HARDIMAN, CHARLES J

ORLANDO, FL 32818

HARDIMAN, THOMAS O

POTSDAM, NY 13676

5801 N APOPKA-VINELAN

(X) Change () Addition

836 OLD POTSDAM-PARISHVILLE ROAD

SIGNATURE: JOSEPH J. HARDIMAN D 02/21/2005