

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V16799

1. Entity Name
DONHAROLD, INC.



Principal Place of Business
2209 LANCE BLVD.
COCOA, FL 32926

Mailing Address
2209 LANCE BLVD.
COCOA, FL 32926

FILED
May 02, 2008 08:00 AM
Secretary of State



04242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3111631	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUFF, HAROLD
2209 LANCE BLVD.
COCOA, FL 32926

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	HUFF, HAROLD
STREET ADDRESS	2209 LANCE BLVD.
CITY-ST-ZIP	COCOA, FL

TITLE	DVS
NAME	HUFF, DONALD
STREET ADDRESS	2209 LANCE BLVD.
CITY-ST-ZIP	COCOA, FL

TITLE

U000000944450
05/29/08-80100-012 150.00

**DO NOT WRITE
IN THIS SPACE**

This filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/08