

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000101293

1. Entity Name
HARING ENTERPRISES, INC.



Principal Place of Business
901 ARNOLD ROAD
KENANSVILLE, FL 34739

Mailing Address
901 ARNOLD RD
KENANSVILLE, FL 34739

FILED
Feb 19, 2005 08:00 AM
Secretary of State



01052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3610436

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARING, ELIZABETH
901 ARNOLD RD
KENANSVILLE, FL 34739

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IN THIS SPACE**

B. 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 RPA if applicable

(NOTE: Registered Agent signature required on annual statement)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HARING, ELIZABETH A
STREET ADDRESS	901 ARNOLD RD
CITY-STATE-ZIP	KENANSVILLE, FL 34739
TITLE	SVPD
NAME	HARING, GARY
STREET ADDRESS	901 ARNOLD RD
CITY-STATE-ZIP	KENANSVILLE, FL 34739
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), Florida Statutes. I further certify that the information 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 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 on the report as changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Elizabeth H. Haring President

2/15/05 321-517-9294 (407) 436-1021