


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90019 017 ****61.25

DOCUMENT # 716295					
1. Entity Name HARBOR LAKES OF NAPLES, INC.					
Principal Place of Business 1155 SANDPIPER STREET NAPLES, FL 34102			Mailing Address 745 12TH AVE., S. SUITE D NAPLES, FL 34102		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1353649	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MOORE PROPERTY MANAGEMENT, INC. 745 12TH AVENUE, S., SUITE D NAPLES, FL 34102			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
T NAME STREET ADDRESS CITY-ST-ZIP	REED, DOROTHY 1155 SANDPIPER ST NAPLES, FL 34102	<input checked="" type="checkbox"/> Delete	D NAME STREET ADDRESS CITY-ST-ZIP	LITTLE, BRENDA 1155 SANDPIPER STREET # E8 Naples, FL 34102	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
P NAME STREET ADDRESS CITY-ST-ZIP	BEDNAR, DOROTHY 1155 SANDPIPER ST F-4 NAPLES, FL 34102	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
S NAME STREET ADDRESS CITY-ST-ZIP	SULLIVAN, MAUREEN 1155 SANDPIPER ST G-2 NAPLES, FL 34102	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP NAME STREET ADDRESS CITY-ST-ZIP	HUSTON, BOB 1155 SANDPIPER ST A-1 NAPLES, FL 34102	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME STREET ADDRESS CITY-ST-ZIP	WHITTING, IRENE 1155 SANDPIPER ST E-7 NAPLES, FL 34102	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME STREET ADDRESS CITY-ST-ZIP	JENNER, TOM 1155 SANDPIPER ST C-7 NAPLES, FL 34102	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Dorothy Bednar</i>			2/26/04		298-0219
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #