2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 8:00 am
Secretary of State
03-20-2006 90005 025 ****61.25

DOCUMENT # 732464

1. Entity Name
HARBOUR HOUSE CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
1217 SOMBRERO BLVD. MARATHON, FL 33050 US	P.O. BOX 500268 MARATHON, FL 33050-0268 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02172006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1706286 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CRUTCHFIELD, HAYDEN
1217 SOMBRERO BLVD
UNIT 13
MARATHON, FL 33050

7. Name and Address of New Registered Agent

Name: Pam Morse
Street Address (P.O. Box Number is Not Acceptable): 1217 Sombrero Blvd Unit 11
City: Marathon **FL** Zip Code: 33050

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: Pamela J. Morse Pamela J. Morse 3/8/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CRUTCHFIELD, HAYDEN D 1217 SOMBRERO BLVD, UNIT 13 MARATHON, FL 33050	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DBM CRUTCHFIELD, HAYDEN 1217 SOMBRERO BLVD UNIT 13 MARATHON FL 33050 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ~~TREVATPAN, AUB~~REY ~~1217 SOMBRERO BLVD, UNIT~~ 35 ~~MARATHON, FL~~ 33050	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BOB AMSLER 1217 SOMBRERO BLVD UNIT 31 MARATHON, FL 33050 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP LOTT, D. N 1217 SOMBRERO BLVD. STE 22 MARATHON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DBM CACERES, MAGGIE 1217 SOMBRERO BLVD UNIT 26 MARATHON, FL 33050 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ~~I~~CRUTCHFIC, ~~KAUTCH~~IK, MARVIN 1217 SOMBERO BLVD UNIT 24 MARATHON, FL 33050	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PAM MORSE 1217 SOMBRERO BLVD UNIT 11 MARATHON, FL 33050 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DBM AMSLER, MARK 1217 SOMBRERO BLVD,UNIT 31 MARATHON, FL 33050	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Pamela J. Morse Pamela J. Morse 3/8/06 440-352-2600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #