


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F03000003304**  
 1. Entity Name  
**HARBORCHASE OF GAINESVILLE, INC.**



Principal Place of Business 1440 HIGHWAY A1A VERO BEACH, FL 32963	Mailing Address 1440 HIGHWAY A1A VERO BEACH, FL 32963
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**DO NOT WRITE IN THIS SPACE**



04072006 No Chg-P CR2ED34 (11/05)

4. FEI Number 02-0697155	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  
 F&L CORP.  
 ONE INDEPENDENT DRIVE  
 SUITE 1300  
 JACKSONVILLE, FL 32202

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

1100000534863  
 05/08/06-80029-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP SMICK, TIMOTHY S 1440 HIGHWAY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS SIMMONS, DANIEL L 1440 HIGHWAY A1A VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AILLS, ZACHARY 1440 HIGHWAY A1A VERO BEACH, FL 32963
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**DO NOT WRITE IN THIS SPACE**

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 607, 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: [Signature] Date: 4/24/06 772-492-5002  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR