2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005
Secretary of State

DOCUMENT# L70319

Entity Name: HARBORSIDE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

3285-A PLACIDA RD
PELICAN PLAZA
ENGLEWOOD, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

3285-A PLACIDA RD
PELICAN PLAZA
ENGLEWOOD, FL 34224 US

New Mailing Address:

FEI Number: 65-0186183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUHT, WILLIAM O
3285-A PLACIDA RD
PELICAN PLAZA
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

MURRAY, MARIANA
3285-A PLACIDA RD
PELICAN PLAZA
ENGLEWOOD, FL 34224 US

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.

SIGNATURE: MARIANA MURRAY 04/08/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete
Name: GUHT, WILLIAM O.,
Address: 2419 HERRON TER
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VPST ( ) Delete
Name: ALMASHY, DEBRA
Address: 738 TICKNOC AVE
City-St-Zip: NEWTON FALLS, OH 44444

Title: VP ( ) Delete
Name: SHOEMAKER, MARK W
Address: 13100 MCCALL RD #189
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition
Name: GUHT, HUGHEY LENE,
Address: 2419 HERRON TER
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VPST (X) Change ( ) Addition
Name: ALMASHY, DEBRA
Address: 738 TICKNOR AVE
City-St-Zip: NEWTON FALLS, OH 44444

Title: VP (X) Change ( ) Addition
Name: SHOEMAKER, MARK W
Address: 13514 DARNELL AVE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: T ( ) Change (X) Addition
Name: MURRAY, MARIANA
Address: 6963 MINEOLA RD
City-St-Zip: ENGLEWOOD, FL 34224

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK W SHOEMAKER VP 04/08/2005
Electronic Signature of Signing Officer or Director Date