## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 29, 2008 8:00 am Secretary of State

DOCUMENT # N0000006951  1. Enlity Name GULF HARBOR MOORINGS, INC.							08-29-2008	90001 006 **	***61.	25
Principal Plac C/O MICHAEL 759 PARK AN NAPLES, FL	l t hoyt Ve	Mailing Address 727 GLENDALE AVE NAPLES, FL 34110	27 GLENDALE AVE				!			
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				08262008	Chg-NP	CR2E037 (1	2/06)	
City & State		City & State			4. FEI Numb NOT AF		er PPLICABLE		$\rightarrow$	plied For Applicable
Zip	Country	Zip	Cou	untry		5. Certificate	of Status Desired		75 Addi Required	
	6. Name and Address of Curren	t Registered Agent				7. Name and	Address of New	Registered Agen	ţ	
VIENC D	A111			Name	9	:0# i	Zunst	Éin		
KLENS, PAUL 727 GLENDALE AVE NADLES EL 34110				Street Address (P.O. Box Number is Not Acceptable)						
NAPLES, FL 34110			Na			les		34110	2	
				City	'			<b>FĹ</b> l z	ip Code	ı
SIGNATURE .	ions of registered agent.									
	Signature, typed or printed name of registered age	nt and trite if applicable. (Ni	OTE: Registere	d Agent signatu	re required	when reinstating)		DATE		
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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: \_

SIGNATURE AND TYPED OF POINTED NAME OF SIGNING OFFICER OR DIRECTOR

2908 239 287 233

Daytime Phone #