2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Apr 09, 2004 8:00 am Secretary of State DOCUMENT # N93000002624 1. Entity Name 04-09-2004 90060 035 ****61.25 HARBOR LAKES CONDOMINIUM ASSOCIATION, INC. Mailing Address Principal Place of Business C/O WBG SW FL INC. 3461 BONITA BAY BOULEVARD #101 27001 LAKE HARBOR COURT 54029516 **BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 65-0421618 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BACUMAN, BOB Street Address (P.O. Box Number is Not Acceptable) C/O WGB SOUTHWEST FL. INC 27800 OLD 41 ROAD **BONITA SPRINGS FL 34135** City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition HJALMQUIST, JOAN NAME NAME 27050 LAKE HARBOR CRT. #202 STREET ADDRESS STREET ADDRESS BONITA SPRINGS FL 34134 CITY-ST-ZIP CITY-ST-ZIP VPD. TITLE ☐ Delete TITLE ☐ Change ☐ Addition BLATT, MONTY NAME NAME 27091 LAKE HARBOR CT #102 STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-ZIP CITY-ST-ZIP PD Change TITLE ☐ Delete TITLE . Addition MCDONNELL, JOHN NAME NAME 27080 LAKE HARBOR CT #102 STREET ADDRESS STREET ADDRESS BONITA SPRINGS FL 34134 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition JACKSON, STEVE NAME NAME 27020 LAKE HARBOR CT. #103 STREET ADDRESS STREET ADDRESS **BONITA SPRINGS FL 34134** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE MCGRATH, TOM NAME NAME 27021 LAKE HARBOR COURT #B202 STREET ADDRESS STREET ADDRESS BONITA SPRINGS FL 34134 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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

FILED