

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006635

FILED
Apr 25, 2007
Secretary of State

Entity Name: THE HARBOUR CLUB AT LIGHTHOUSE BAY, INC.

Current Principal Place of Business:

23750 OLD LIGHTHOUSE ROAD
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

6700 LONE OAK BLVD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3615607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, BYRON
6700 LONE OAK BLVD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAPP, JOHN
Address: 10821 HALFMoon SHOAL RD #202
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD () Delete
Name: MIDKIFF, GARY
Address: 10921 OAK ISLAND RD #202
City-St-Zip: BONITA SPRINGS, FL 34135

Title: M () Delete
Name: LEAFFER, ALAN
Address: 6700 LONE OAK BLVD
City-St-Zip: NAPLES, FL 34109

Title: M () Delete
Name: ROSS, BYRON
Address: 6700 LONE OAK BLVD
City-St-Zip: NAPLES, FL 34109

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAKIELA, DAN
Address: 109 SANTA MARGHERITA RD., #102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: CARDELLA, JOE
Address: 10761 HALFMoon SHOALS RD., #203
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T (X) Change () Addition
Name: BOUDREAU, BOB
Address: 23820 AMALFI COAST RD, #202
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S (X) Change () Addition
Name: SECORD, MARY
Address: 10771 CROOKED RIVER RD, #103
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Change (X) Addition
Name: BRAWER, MARLENE
Address: 10310 CAPE ROMAN RD., # 101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Change (X) Addition
Name: WAGNER, DAN
Address: 10701 CROOKED RIVER RD, #103
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BYRON ROSS

MGR

04/25/2007

Electronic Signature of Signing Officer or Director

Date