

**2005 FOR PROFIT CORPORATION  
AMENDED ANNUAL REPORT**


FILED

2005 JUL -8 AM 8:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P03000120580**

1. Entity Name  
**HARBOUR DEVELOPMENT GROUP, INC.**



Principal Place of Business      Mailing Address

4635 RICHMOND RD STE 105      4635 RICHMOND RD STE 105  
WARRENSVILLE HEIGHTS, OH 44128 US      WARRENSVILLE HEIGHTS, OH 44128 US

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



07012005      Chg-P      CR2E034 (10/03)

**6. Name and Address of Current Registered Agent**

~~WANEGETT, RICHARD W~~  
~~2248 FIRST STREET~~  
~~FORT MYERS, FL 33901~~

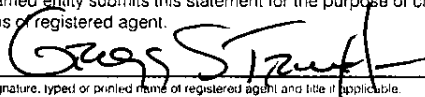
**7. Name and Address of New Registered Agent**

Name: **Bolanos Truxton, P.A.**

Street Address (P.O. Box Number is Not Acceptable):  
**12800 University Drive, Suite 350**

City: **Fort Myers**      State: **FL**      Zip Code: **33907**

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:       DATE: **7/5/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Amended AR is \$61.25**

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

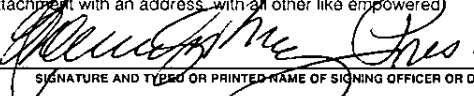
**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	OFFENBERG, BERNARD D	10919 NASHVILLE DRIVE	COOPER CITY, FL 33026	<input type="checkbox"/>
	VPST	SIMON, SIDNEY N	4635 RICHMOND ROAD #105 WARRENSVILLE HEIGHTS, OH 44128	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D/P/S/T	Bernard D. Offenberg	5015 SW 17 Avenue	Cape Coral, FL 33914	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	VP	Sidney N. Simon	4635 Richmond Road #105 Warrensville Heights, OH 44128	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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:       DATE: **7/5/05**      Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR