

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73945

FILED  
Jan 11, 2012  
Secretary of State

**Entity Name:** HARBOURSIDE CUSTOM HOMES, INC.

**Current Principal Place of Business:**

8200 HEALTH CENTER BLVD.  
SUITE 104  
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

8200 HEALTH CENTER BLVD.  
SUITE 104  
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

**FEI Number:** 65-0279581      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WINER, STEVE I  
2320 FIRST STREET  
SUITE 1000  
FORT MYERS, FL 33901 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:** CEO  
**Name:** COLTON, JERRY E.  
**Address:** 18691 CYPRESS HAVEN DRIVE  
**City-St-Zip:** FORT MYERS, FL 33908

**Title:** PRES  
**Name:** JENKINS, FRANK R.  
**Address:** 11951 PALOMINO LN  
**City-St-Zip:** FT. MYERS, FL 33912

**Title:** SECT  
**Name:** COLTON, SANDRA J.  
**Address:** 18691 CYPRESS HAVEN DRIVE  
**City-St-Zip:** FT. MYERS, FL 33908

I hereby 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 all other like empowered.

SIGNATURE: JERRY E. COLTON

CEO

01/11/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date