

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 671161

Entity Name: HARBOR SERVICES, INC.**Current Principal Place of Business:**9060 HERRING ST
CAPE CANAVERAL, FL 32920**Current Mailing Address:**P O BOX 816
CAPE CANAVERAL, FL 32920 US**FEI Number:** 59-2010134**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BORGIE, BENJAMIN B
500 APACHE TRAIL
MERRITT ISLAND, FL 32953 US*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:** BENJAMIN B BORGIE

01/04/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GRIMISON, THOMAS R.
Address 1275 ISLAND DR
City-State-Zip: MERRITT ISLAND FL 32952

Title DIRECTOR
Name BROWN, DOUGLAS
Address 924 ENISGROVE WAY
City-State-Zip: THE VILLAGES FL 32163

Title DIRECTOR
Name GASECKI, STEPHEN
Address 2285 TANGLWOOD LANE
City-State-Zip: MERRITT ISLAND FL 32953

Title DIRECTOR
Name MELLO, LOU
Address 324 HARBOR DR
City-State-Zip: CAPE CANAVERAL FL 32920

Title CHAIRMAN
Name BORGIE, BENJAMIN
Address 500 APACHE TRAIL
City-State-Zip: MERRITT ISLAND FL 32953

Title DIRECTOR
Name MCMILLIN, BRENDAN
Address PO BOX 1018
City-State-Zip: CAPE CANAVERAL FL 32920

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: BRENDAN MCMILLIN

DIRECTOR

01/04/2019

Electronic Signature of Signing Officer/Director Detail

Date