## 2020 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 01/05/2020

Electronic Signature of Registered Agent

Date

**FILED** Jan 05, 2020

**Secretary of State** 

0038167421CC

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

GRIMISON, THOMAS R. Name GASECKI, STEPHEN Name 1275 ISLAND DR Address 2285 TANGLWOOD LANE Address

City-State-Zip: MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32952 City-State-Zip:

Title **CHAIRMAN** Title DIRECTOR

Name BORGIE, BENJAMIN Name MELLO, LOU Address 500 APACHE TRAIL Address 324 HARBOR DR

MERRITT ISLAND FL 32953 City-State-Zip: City-State-Zip: CAPE CANAVERAL FL 32920

Title **DIRECTOR** 

MCMILLIN, BRENDAN Name

PO BOX 1018 Address

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

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

01/05/2020

Date