

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000026881

**Entity Name:** SYLVAN SHORES HARBOR, INC.**Current Principal Place of Business:**1850 NW PINETREE WAY  
STUART, FL 34994**Current Mailing Address:**1850 NW PINETREE WAY  
STUART, FL 34994**FEI Number:** 65-0986280**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAYNES, WM WOOD  
1850 NW PINETREE WAY  
STUART, FL 34994 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P
Name	HAYNES, WM WOOD
Address	1850 NW PINE TREE WAY
City-State-Zip:	STUART FL 34994

Title	V
Name	RICQUORTE, EDWARD
Address	1898 NW PINE LAKE DR
City-State-Zip:	STUART FL 34994

Title	T
Name	HOLIHAN, VICKI
Address	1948 NW PINE LAKE DR
City-State-Zip:	STUART FL 34994

Title	S
Name	GIAMPIETRA, FRANK
Address	1889 NW PINE TREE WAY
City-State-Zip:	STUART FL 34994

*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:** VICKI HOLIHAN**TREASURER****03/03/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date