

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000101576

Entity Name: HARBOURWOOD FACILITY INC

Current Principal Place of Business:

400 RELLA BLVD, STE. 200
MONTEBELLO, NY 10901

Current Mailing Address:

400 RELLA BLVD, STE. 200
MONTEBELLO, NY 10901

FEI Number: 82-3934610

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VCORP SERVICES, LLC
5011 SOUTH STATE ROAD7, STE. 106
DAVIE, FL 33314 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 D
Name SKY HARBOR DRIVE CARE INC
Address 400 RELLA BLVD, STE. 200
City-State-Zip: MONTEBELLO NY 10901

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: MICHAEL BLEICH

AUTHORIZED MEMBER

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date