2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713624

Entity Name: HARBOUR HOUSE OF VENICE, INC.

FILED Feb 10, 2009 Secretary of State

Current Principal Place of Business:

1000 TARPON CENTER DR VENICE, FL 34285

Current Mailing Address: New Mailing Address:

C/O ANTARES GROUP, INC C/O ANTARES GROUP, INC 4195 S TAMIAMI TRAIL PMB 173 4195 S. TAMIAMI TRAIL, PMB 173 VENICE, FL 34293 VENICE, FL 34293 ÚS

FEI Number: 59-1237601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANTARES GROUP INC ANTARES GROUP, INC. 4195 S TAMIAMI TRAIL PMB 173 4195 S. TAMIAMI TRAIL, PMB 173 VENICE, FL 34293 VENICE, FL 34293 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: CYNTHIA A. KRUMENAKER 02/10/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Business:

(X) Change () Addition () Delete PRIOR, ROBERT RUDMAN, MARK Name: Name:

1000 TARPON CENTER DR. 501 Address: 4195 S. TAMIAMI TR., PMB #173 Address:

City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34293

Title: Title: (X) Change () Addition () Delete

TOWNE, SARA Name: TOWNE, SARA Name: Address: 1000 TARPON CENTER DR. #102 Address: 4195 S. TAMIAMI TR., PMB #173

City-St-Zip: VENICE, FL City-St-Zip: VENICE, FL 34293

Title: () Delete Title: SD (X) Change () Addition

JOHNSON, PATRICIA Name: BROWNING, PERRY Name: 1000 TARPON CENTER DR # 204 4195 S. TAMIAMI TR., PMB #173 Address: Address:

City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34293

(X) Change () Addition Title: PD () Delete Title:

Name: RUDMAN, MARK Name: KANE, EDWARD 1000 TARPON CENTER DR #202 4195 S. TAMIAMI TR., PMB #173 Address: Address:

City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34293

Title: () Delete Title: (X) Change () Addition

KELLING, GIILBERT KELLING, GILBERT Name: Name:

1000 TARPON CENTER DR #401 4195 S. TAMIAMI TR., PMB #173 Address: Address:

City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34293

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA A. KRUMENAKER MGR 02/10/2009