

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT# A10174

1. EntityName
HARBOURRIDGE,LTD.



PrincipalPlaceofBusiness
1025S.W.MARTINDOWNSBLVD.,#205
PALMCITY,FL34990

MailingAddress
1025S.W.MARTINDOWNSBLVD.,#205
PALMCITY,FL34990



01092007 No Chg-LP

CR2E003(12/06)

DO NOT WRITE IN THIS SPACE

4. FEINumber

59-2134232

AppliedFor

NotApplicable

5. CertificateofStatusDesired ☐

\$8.75 Additional
FeeRequired

6. NameandAddressofCurrentRegisteredAgent

SCHULER,JACKC.
1025S.W.MARTINDOWNSBLVD.,#205
PALMCITY,FL34990

**DO NOT WRITE
IN THIS SPACE**

8. Theabovenamedentitysubmits thisstatementfor thepurposeofchangingitsregisteredofficeorregisteredagent,orboth, intheStateofFlorida.Iamfamiliarwith, andaccept theobligationsofregisteredagent.

SIGNATURE

Signature,typedorprintednameofregisteredagentandtitleapplicable

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00

AGENERALPARTNERTHATISABUSINESSENTITYMUSTBEREGISTEREDANDACTIVEWITHTHISOFFICE.
NOTE: GeneralPartnersMAYNOTbechangedontheform; anamendmentmustbefiledtochangeageneralpartner.

12. GENERALPARTNERINFORMATION

DOCUMENT# F21331
NAME HARBOURRIDGE,INC.
STREETADDRESS 1025S.W.MARTINDOWNSBLVD.,#205
CITY- ST- ZIP PALMCITY,FL34990

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U000000538039
01/24/07-80060-017 500.00

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/22/07

Date

Daytime Phone#

STAPLE CHECK HERE