

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A22708

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** HARBOR BRIDGE 17, II, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

CATHERINE P SANDERS  
1203 W. MARION AVE  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

CATHERINE P SANDERS  
1203 W. MARION AVE  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 59-2697078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANDERS, CATHERINE P  
1203 W. MARION AVE  
PUNTA GORDA, FL 33950 US

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

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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: GREENBERG, BENJAMIN  
Address: 21583 EDGEWATER DR.  
City-St-Zip: PORT CHARLOTTE, FL

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: SANDERS, CATHERINE P  
Address: 3830 ST. KITTS COURT  
City-St-Zip: PUNTA GORDA, FL 33950

Address:  
City-St-Zip:

Document #:

Name: KEYSER, JAMES W  
Address: 1203 W. MARION AVE  
City-St-Zip: PUNTA GORDA, FL 33950

Address:  
City-St-Zip:

Document #:

Name: PONTICOS, STEVE E  
Address: 7 BYRSONIMA COURT WEST  
City-St-Zip: HOMOSASSA, FL 34446

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: CATHERINE P SANDERS

GP

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date