2008 FOR PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # G12029 1. Entity Name HARBOUR ISLAND REALTY OF ST. AUGUSTINE, INC.							90021 040 ***15	0.00
Principal Place of Business 1301 PLANTATION ISLAND DR SUITE 206 B SAINT AUGUSTINE, FL 32080 US		Mailing Address P.O. DRAWER 70 ST AUGUSTINE, FL 32085 US			\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			
2. Principal Place of Business - No P.O. Box # 601 S PONCE DE LEON BLVD		3. Mailing Address						
Suite, Apt. #, etc. STE B		Suite, Apt. #, etc.		03182008	Chg-P	CR2E034 (12/06)		
City & State ST AUGUSTINE FL		City & State		4. FEI Number 59-3007		N	pplied For ot Applicable	
32084 Country USA		Zip	Country			Status Desired	See Require	
	6. Name and Address of Current	Registered Agent		Name	7. Name and A	Address of New R	egistered Agent	
THOMPSON, PAUL J 1301 PLANTATION ISLAND DRIVE STE 206B SAINT AUGUSTINE, FL 32080			-	601 S PO STE B	STINE (P.O. Box Number is Not Acceptable) ONCE DE LEON BLVD FL Zip Code 32080			
8. The above the obligat	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registere	d office or registe	ered agent, or both	, in the State of Flo	orida. I am familiar with	and accept
SIGNATURE PAUL J THOMPSON, PRES. Signature, typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when revistaring) DATE								
								I
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campai Trust Fund Cont			5.00 May Be ded to Fees		•	
After Ma	ay 1, 2008 Fee will be \$550.	OO Trust Fund Cont	ribution.	Ād	ded to Fees	HANGES TO OFF	ICERS AND DIRECTOR	
After Ma	ay 1, 2008 Fee will be \$550.	ODIRECTORS Delete	11. TITLE NAME	Ād	ded to Fees	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11
After Ma 10. TITLE NAME STREET ADDRESS	OFFICERS AND PTD THOMPSON, PAUL J PO DRAWER 70	ODIRECTORS Delete	11. TITLE NAME STREE CITY- TITLE NAME STREE	Add	ded to Fees	HANGES TO OFF		
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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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PAUL I THOMPSON

3/20/2008 904 824-1754 Daytime Promet