## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L02000028285**

1. Entity Name
HARBOR TOWNE DEVELOPERS, L.L.C.



FILED
May 03, 2004 08:00 AM
Secretary of State

Principal Place of Business

791 E. PLANTATION DR. TITUSVILLE, FL 32796

Mailing Address

791 E, PLANTATION DR. TITUSVILLE, FL 32796



04302004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	Applied For
01-0761294	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

EVANS, JOHN H ESQ. 1702 S. WASHINGTON AVE. TITUSVILLE, FL 32780

the obligations of registered agent.

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature: typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when teinstating)	DATE	
Fi	iling Fee is \$50.00 ue by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY+ST - ZIP	MGR GRUPP, OTTO 791 PLANTATION DR. TITUSVILLE, FL 32780			
TITLE NAME STREET ADDRESS GITY-ST ZIP			000000143798 05/03/04-80200-019 <b>50.00</b>	
TITLE NAME STREET ADDRESS CITY ST-ZIP		DO	NOT WRITE	
TUTLE NAME STREET ADDRESS CITY - ST - ZIP		IN T	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY - ST - ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 managing member or manager of the limited liability company or the peceiver or trustee empty ered to execute this report as required by Chapter 608, Florida Statutes.				

MBER, OR AUTHORIZED REPRESENTATIVE

8. 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. I am familiar with, and accept