

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036306

FILED
Jul 08, 2005
Secretary of State

Entity Name: HARBOUR POINTE RESIDENCES, LLC

Current Principal Place of Business:

1060 KEENE ROAD
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

1060 KEENE ROAD
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ENTREKEN, EDWARD
1060 KEENE ROAD
DUNEDIN, FL 34698 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TOULOU MIS, WILLIAM E
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Delete
Name: TOULOU MIS, GEORGE E
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Delete
Name: TOULOU MIS, FRANK E
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

Title: MGRM (X) Delete
Name: SIANDRIS, ANESTI
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM E TOULOU MIS

MGR

07/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date