

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034165

Entity Name: HARBOUR HOLDINGS, LLC

FILED
Jan 22, 2008
Secretary of State

Current Principal Place of Business:

1212 SALT LAKE DR.
TARPON SPRINGS, FL 34689

New Principal Place of Business:

799 SALT LAKE DR.
TARPON SPRINGS, FL 34689

Current Mailing Address:

1212 SALT LAKE DR.
TARPON SPRINGS, FL 34689

New Mailing Address:

799 SALT LAKE DR.
TARPON SPRINGS, FL 34689

FEI Number: 20-1131096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, TAMI L
1212 SALT LAKE DR.
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

ADAMS, TAMI L
799 SALT LAKE DR.
TARPON SPRINGS, FL 34689 US

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:

01/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADAMS, TAMI L
Address: 1212 SALT LAKE DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM () Delete
Name: ADAMS, ROBERT C
Address: 1212 SALT LAKE DR.
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADAMS, TAMI L
Address: 799 SALT LAKE DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM (X) Change () Addition
Name: ADAMS, ROBERT C
Address: 799 SALT LAKE DR.
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TAMI L. ADAMS

MGRM

01/22/2008

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