L06000017929

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-L	IP WAIT	MAIL
	(Business Entity Name)	· · · · · · · · · · · · · · · · · · ·
	(Document Number)	,
Certified Copies	Certificates of \$	Status
Special Instructions to Filing Officer:		
		:
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Office Use Only



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DIVISION OF CORPORATIONS

B. KOHR
MAY 1 0 2011
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	1/4
SUBJ		our Development, L.L.C.
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
	James Larry Nichols, Esquire Name of Person	
	James Larry Nichols, P.A. Firm/Company	
	8191 College Parkway, #205 Address	
	Fort Myers, FL 33919 City/State and Zip Code	 .
E-	jonf@marinaclubsfl.com mail address: (to be used for future annual report notifica	uion)
For fu	rther information concerning this matter, p	lease call:
	James Larry Nichols at ((239) 433-1305 Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following an	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	a Harbour Development, L.L.C.	
2. (a) Principal office address of limited liability company	1500 Colonial Boulevard, #103	
(Note: MUST BE STREET ADDRESS)	Fort Myers, FL 33907	
(b) Mailing address of limited liability company:	1500 Colonial Boulevard, #103	
(Note: MAY BE POST OFFICE BOX)	Fort Myers, FL 33907	
2/17/06	L06000017929	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State		
Registered Agent:	CFRA_LLC	
Registered Office Address:	4221 West Boy Scout Boulevard, #1006 Tampa, FL 33607	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: James Larry Nichols, Esquire		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8191 College Parkway, #205 Fort Myers ,FL 33919	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Jon Finstrom Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	per ana complete performance of my duties, lition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00