

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070060

Entity Name: HARBOR SHORES #1, LLC

FILED  
Jul 23, 2007  
Secretary of State

**Current Principal Place of Business:**

819 PEACOCK PLAZA, SUITE 809  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

819 PEACOCK PLAZA, SUITE 809  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 20-5322630      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

**Name and Address of New Registered Agent:**

ALLEN, JEFFREY E  
819 PEACOCK PLAZA, SUITE 809  
KEY WEST, FL 33040      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: J. ALLEN ENTERPRISES, , LLC  
Address: 819 PEACOCK PLAZA, SUITE 809  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

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

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: JEFFREY E ALLEN

MGR

07/23/2007

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