

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000117051

FILED
Apr 27, 2009
Secretary of State

Entity Name: HARBOR GROUP ASSOCIATES LLC

Current Principal Place of Business:

8026 SUNPORT DR.
306
ORLANDO,, FL 32809 US

Current Mailing Address:

8026 SUNPORT DR.
306
ORLANDO,, FL 32809 US

FEI Number: 26-3929955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, MAGGIE M
8026 SUNPORT DR
306
ORLANDO, FL 32809 US

New Principal Place of Business:

6421 MILNER BLVD.
3
ORLANDO,, FL 32809 US

New Mailing Address:

6421 MILNER BLVD.
3
ORLANDO,, FL 32809 US

Name and Address of New Registered Agent:

LYNCH, MAGGIE M
6421 MILNER BLVD.
3
ORLANDO, FL 32809 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:

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LYNCH, MAGGIE M
Address: 8026 SUNPORT DR. SUITE 306
City-St-Zip: ORTLANDO, FL 32809

Title: MGR () Delete
Name: LYNCH, ZACHARY M
Address: 8026 SUNPORT DR. SUITE 306
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LYNCH, MAGGIE M
Address: 6421 MILNER BLVD. SUITE 3
City-St-Zip: ORLANDO, FL 32809

Title: MGR (X) Change () Addition
Name: LYNCH, ZACHARY M
Address: 6421 MILNER BLVD. SUITE 3
City-St-Zip: ORLANDO, FL 32809

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: MAGGIE LYNCH

MGR

04/27/2009

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