

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L09578

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** HARBOUR DRIVE ASSOCIATES, INC.

**Current Principal Place of Business:**

790 HARBOUR DR., SUITE 2A  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

790 HARBOUR DR., SUITE 2 C  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 65-0141405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HURT, RONALD L  
790 HARBOUR DRIVE  
STE 2C  
NAPLES, FL 34103 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: HURT, RONALD L  
Address: 790 HARBOUR DRIVE #2C  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: ASSAAD, WAFAA F  
Address: 790 HARBOUR DRIVE #2C  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RONALD HURT

PSTD

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date