

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005356

FILED
May 06, 2005
Secretary of State

Entity Name: HARBOR MANAGEMENT MAINTENANCE, L.L.C.

Current Principal Place of Business:

15600 SW 288 ST #406
HOMESTEAD, FL 33033 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 901755
HOMESTEAD, FL 330901755 US

New Mailing Address:

FEI Number: 65-0947797 **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:

VANHOOK, MICHELLE
15600 SW 288 STREET
#406
HOMESTEAD, FL 33032 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/MEMBERS:

Title: MGR () Delete
Name: VANHOOK, MICHELLE
Address: PO BOX 901755
City-St-Zip: HOMESTEAD, FL 330901355

Title: MGR () Delete
Name: VANHOOK, RAYMOND
Address: PO BOX 901755
City-St-Zip: HOMESTEAD, FL 330901755

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VANHOOK, MICHELLE
Address: PO BOX 901755
City-St-Zip: HOMESTEAD, FL 330901755

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHELLE VAN HOOK

MGR

05/06/2005

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