2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000001607

1. Entity Name

HARBOUR ISLAND PROPERTIES, LLC



FILED Apr 26, 2004 08:00 AM Secretary of State

Principal Place of Business

1300 ARCOLA AVE SILVER SPRING, MD 20902 Mailing Address

1300 ARCOLA AVE

SILVER SPRING, MD 20902



DO NOT WRITE IN THIS SPACE

04222004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 52-2329863

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

HIQ CORPORATE SERVICES, INC. 526 E PARK AVE SUITE 200 TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

	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. I at the obligations of registered agent.	m familiar with, and accept
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(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2004

DATE 000000133080 04/27/04-80070-011 50.00

MANAGING MEMBERS/MANAGERS 9. TITLE NAME GRAUMAN, TOBY 1300 ARCOLA AVENUE STREET ADDRESS CITY-ST-ZIP SILVER SPRING, MD 20902 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

STREET ADDRESS

aumou SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Grauman

Daytime Phone #