2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2007
Secretary of State

DOCUMENT# N03000000540

Entity Name: HARBOR PROFESSIONAL CENTRE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2421 SHREVE ST
SUITE 115
PUNTA GORDA, FL 33950

New Principal Place of Business:

3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2421 SHREVE ST
SUITE 115
PUNTA GORDA, FL 33950

New Mailing Address:

3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952

FEI Number: 13-4257930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENNETT, DOROTHY M
2421 SHREVE ST
SUITE 115
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

NASIR, KHALIDI
3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952 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: NASIR KHALIDI 03/09/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KHALIDI, NASIR MD
Address: 2595 HARBOR BLVD STE 206
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: ZUSMAN, AMY
Address: 3430 TAMIAMI TRL STE A
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: VAKIL, SAMIR DPM
Address: 3406 TAMIAMI TRL STE 1
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KHALIDI, NASIR MD
Address: 3420 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

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

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 Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NASIR KHALIDI DIR 03/09/2007
Electronic Signature of Signing Officer or Director Date