

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004226

FILED
Apr 25, 2007
Secretary of State

Entity Name: HARBOR LIGHTS ASSOCIATES, INC.

Current Principal Place of Business:

3191 MEDICAL CTR DR
15103
MC KINNEY, TX 75069

New Principal Place of Business:

Current Mailing Address:

3191 MEDICAL CTR DR
15103
MC KINNEY, TX 75069

New Mailing Address:

FEI Number: 33-1049953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENZIE, RONALD
1601 SHERWOOD AVENUE
WEST PALM BEACH, FL 33407 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: ED () Delete
Name: VALENTINE, GEMMA
Address: 3191 MEDICAL CTR DR STE 15103
City-St-Zip: MC KINNEY, TX 75069

Title: D () Delete
Name: VALENTINE, NICOLE
Address: 7117 PARK AVENUE #B-7
City-St-Zip: NORTH BERGEN, NJ 07047

Title: D () Delete
Name: PENNANT, A.G.
Address: 8 WHITNEY STREET
City-St-Zip: EAST HARTFORD, CT 06108

Title: T () Delete
Name: LAZARE, JOSEPH
Address: 171-23 FOCH BLVD.
City-St-Zip: JAMAICA, NY 11434

Title: T () Delete
Name: KATHY, EWING
Address: 101 CONNECTICUT BLVD
City-St-Zip: EAST HARTFORD, CT 06108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: GEMMA VALENTINE

ED

04/25/2007

Electronic Signature of Signing Officer or Director

_____ Date