

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90203 008 ****61.25

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1. Entity Name
**HARBORAGE ON BRADEN RIVER CONDOMINIUM
ASSOCIATION I, INC.**



Principal Place of Business
**8210 LAKEWOOD RANCH BLVD
BRADENTON, FL 34202**

Mailing Address
**8210 LAKEWOOD RANCH BLVD
BRADENTON, FL 34202**

40055569



DO NOT WRITE IN THIS SPACE

03032006 No Chg-NP CR2E037 (11/05)

4. FEI Number **20-3821553** Applied For
NOT APPLICABLE Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BLALOCK, WALTERS HELD & JOHNSON, P.A.
802 11TH ST W
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

8. 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 am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ANDERSON, ALAN
STREET ADDRESS	8210 LAKEWOOD RANCH BLVD
CITY - ST - ZIP	BRADENTON, FL 34202
TITLE	D
NAME	BYRNES, KAREN
STREET ADDRESS	8210 LAKEWOOD RANCH BLVD
CITY - ST - ZIP	BRADENTON, FL 34202
TITLE	D
NAME	HEIM, PRISCILLA
STREET ADDRESS	8210 LAKEWOOD RANCH BLVD
CITY - ST - ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/06 9413281034
Date Daytime Phone #