2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N20875

1. Entity Name

LITTLE HARBOUR CLUB, INC.



FILED Jan 07, 2008 08:00 AN Secretary of State

Principal Place of Business

LITTLE HARBOUR CLUB, INC.

3201 CARDINAL DRIVE VERO BEACH, FL 32-9964 US Mailing Address

LITTLE HARBOUR CLUB, INC. P.O. BOX 3040

VERO BEACH, FL 32964



01032008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2793382 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DOWNEY, DAN 201 CARDINAL DRIVE

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VERO BEACH, FL 32963-4936			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 Squature, 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, 2008	Election Campaign Financ Trust Fund Contribution.	sing	\$5.00 May Be Added to Fees	01/08/08-800	338 26-006 61.25
10.	OFFICERS AND DIRECT	TORS				
NAME STREET ADDRESS CITY-ST-ZIP	PD DOWNEY DANIEL 1325 LITTLE HARBOUR LANE VERO BEACH, FL 32963					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOWNEY, DANIEL 1325 LITTLE HARBOUR LANE VERO BEACH, FL 32963					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESTES, WILLIAM C 1315 LITTLE HARBOUR LANE VERO BEACH, FL 32963			DO	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSS, ALEX 1310 LITTLE HARBOUR DR VERO BEACH, FL 32963			IN '	THIS SPAC	Œ
TITLE NAME						

12. Thereby certify that the information supplied with this filting 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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS