


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N25915</b> 1. Entity Name HARBOR LODGE CONDOMINIUM OWNERS ASSOCIATION, INC.	
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Principal Place of Business 1309 VILLA MILL ALLEY KEY WEST, FL 33040-4749	Mailing Address 1309 VILLA MILL ALLEY KEY WEST, FL 33040-4749
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**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1551890	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

SNOWDEN, ROBERT J  
1309 VILLA MILL ALLEY  
KEY WEST, FL 33040-4789

**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: *Robert J. Snowden* DATE: 1/28/05

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

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000208102 02/01/05-80070-002 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD TOMITA, JERRI 833 EISENHOWER DR #102. KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLUMENTHAL, LOWELL 833 EISENHOWER DR. # KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUPP, GLORIA 833 EISENHOWER DR. #301 KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 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: *Geraldene Tomita* DATE: 1/11/05 305-294-8491

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR