## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 10, 2006 8:00 am Secretary of State

Principal Place of Business   Si Nalling Address	DOCUMENT # N42207  1. Entity Name HARBOR LIGHTS RECREATION ASSOCIATION, INC.									4-10-2006 902		1.25
Suite, Apr. 4, etc.  Suite, Li-1  Cry Sature  Apolled Fox  Not APPLICABLE  Apolled Fox  Not APPLICABLE  Street Address of New Registered Agent  Not Applicable  Street Address of	617 N TAMIAMI TR 617				617 N TAMIAMI TR						·····	
Suite, Apr. 4, etc.  Suite, Li-1  Cry Sature  Apolled Fox  Not APPLICABLE  Apolled Fox  Not APPLICABLE  Street Address of New Registered Agent  Not Applicable  Street Address of	Discipal Disco of Divisions											
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City & State    Country   Sarasota, FL	Suite, Apt. #, etc.			Suite, /	Suite, Apt. #, etc.				03212006 <sub>Ci</sub>	hg-NP CI	R2E037 (11/05)	
Signature   Country   34285   Country   34285   USA   S. Certificate of Status Desired   \$8.75 Additional Fee Required   See	City & State (			City &	City & State			4. FEI Number Applied For				
S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the				<del>-</del>					NOT APPLI	CABLE		
Name Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  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, hyped or printed rame of registered agent and title # Applicable.  (MCTE: Registered Agent agents/a recyled when revisating)  PHIIng Foe is \$61.25 Due by May 1, 2006  9. Election Campaign Financing Trust Fund Contribution.  □ \$5.00 May Be Added to Foes Priorida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITILE UTLEY, JACK SIREL ADDRESS SIT N TAMIAMI TRAIL # 103  VENICE, FL 34285  UTLEY, JACK SIREL ADDRESS CITY SL-2P  VENICE, FL 34285  UTLEY, JACK SIREL ADDRESS CITY SL-2P  VENICE, FL 34282  UTLEY Addition NAME SIREL ADDRESS CITY SL-2P  VENICE, FL 34282  UTLEY ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  SIREL ADDRESS CITY SL-2P  VENICE, FL 34282  UTLEY ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  SIREL ADDRESS CITY SL-2P  VENICE, FL 34285  UTLEY ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition NAME SIREL ADDRESS CITY SL-2P  VENICE, FL 34285  UTLEY ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition NAME SIREL ADDRESS CITY SL-2P  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE, FL 34285  UTLEY ADDITIONS TO THE TRAIL # 60  VENICE TO THE TRAIL # 60  VENICE TO THE TRAIL # 60  VE	Zip	Zip Codiniy				-		5. Certificate of St	atus Desired [			
Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  Signature product or mere of impastered agent and set # applicable.  (NOTE Registered Agent stocker required when rehistable)  DATE  Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITTLE  NAME STREET ADDRESS  OTIV-ST-2P  VENICE, FL 34.285  TITLE  NAME HOFMANN, MARTHA STREET ADDRESS  OTIV-ST-2P  VENICE, FL 34.292  TITLE  NAME HOFMANN, MARTHA STREET ADDRESS  OTIV-ST-2P  VENICE, FL 34.292  TITLE  NAME STREET ADDRESS  OTIV-ST-2P  VENICE, FL 34.285  TITLE  OTIV-ST-2P  VENICE, FL 34.285  TITLE  NAME STREET ADDRESS  OTI	6. Name and Address of Current Registered Agent											
SUITE L-1 SARASOTA, FL 34233  City  FL Zip Code  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  Filling Foe is \$61.25  Due by May 1, 2006  9. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  UTLEY, JACK  UTLEY, JACK  STREET ADDRESS  167 N TAMIAMI TRAIL # 103  VENICE, FL 34285  UTLE  D  ORDUGH, VERBA  617 N TAMIAMI TRAIL #77  VENICE, FL 34292  UTLE  D  ORDUGH, VERBA  617 N TAMIAMI TRAIL #77  VENICE, FL 34292  UTLE  D  ORDUGH, VERBA  617 N TAMIAMI TRAIL #77  VENICE, FL 34292  UTLEY, JACK  OTIV-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  617 N TAMIAMI TRAIL #77  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY-SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  D  MAKE  STREET ADDRESS  STREET ADDRESS  CITY SI-2P  VENICE, FL 34292  UTLE  STREET ADDRESS  CITY SI-2P  VENICE, FL 3429	DOMBER,			Name								
SARASOTA, FL 34233  City FL Zip Code  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, noted or protect name of registered sport and size if apokable. (NOTE Registered Agent signature required whon remissions)  DATE  Filing Fee is \$61.25  Due by May 1, 2006  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  ITILE  NAME  SITERET ADDRESS  CITY ST- Zip  VENICE, FL 34285  TILL  D  PROUGH, VERBA 617 N TAMIAMI TRAIL #103  VENICE, FL 34282  TILL  D  HOFMANN, MARTHA  SIREST ADDRESS  CITY ST- Zip  HOFMANN, MARTHA  HOFMANN, MARTHA  SIREST ADDRESS  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  D  MAKE  ATT TAMIAMI TRAIL #100  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  D  MURRAY, CYNTHIA  MILE  D  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MILE  D  MURRAY, CYNTHIA  MILE  D  MURRAY, CYNTHIA  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  D  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  D  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  MURRAY, CYNTHIA  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  VENICE, FL 34292  TILL  MAKE  SIREST ADDRESS  CITY ST- Zip  MILL  MAKE  SIREST ADDRESS  CITY ST- Zip  MILL  MAKE  MAKE  MAKE  MAKE  MAKE  MAKE  MAKE  MAKE  MAKE  M	3900 CLARK ROAD				Street Address			Address (F	(P.O. Box Number is Not Acceptable)			
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, hyped or printed name of inguistered agent and side if appacable. (INOTE Registered Agent signature required when reinstating).   DATE    Filling Fee is \$61.25							·			*	<del></del>	
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. Tam familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature, hond or printed name of registered agent and title if applicable. (NOTE: Registered Agent separature required when reinstating)   DATE							City El Zip Co				Zip Code	<del></del>
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Trust Fund Contribution. Added to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.  TITLE   CC	SIGNATURE											
TITLE NAME UTLEY, JACK UTLEY,	<u> </u>											
NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285  TITLE NAME PROUGH, VERBA STREET ADDRESS CITY-ST-ZIP NAME PROUGH, VERBA STREET ADDRESS CITY-ST-ZIP NAME PROUGH, VERBA STREET ADDRESS CITY-ST-ZIP NAME HOFMANN, MARTHA STREET ADDRESS CITY-ST-ZIP NAME HOFMANN, MARTHA STREET ADDRESS CITY-ST-ZIP VENICE, FL  NAME STREET ADDRESS CITY-ST-ZIP CHAME STREET ADDRESS CITY-ST-	10.		OFFICERS AND DIF	RECTORS		11.		Δ.	ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTORS IN	10
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STREET ADDRESS CITY-ST-ZIP VENICE, FL 34292  TITLE D NAME HOFMANN, MARTHA STREET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE D NAME MURRAY, CYNTHIA STREET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE D NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE D NAME STREET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE D HARRIET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE D HARRIET ADDRESS CITY-ST-ZIP VENICE, FL  TITLE DIV NAME HINDMARSH, MAUREEN STREET ADDRESS G17 N TAMIAMI TRAIL #28  TITLE DIV NAME HINDMARSH, MAUREEN STREET ADDRESS G17 N TAMIAMI TRAIL #28  STREET ADDRESS		1			☐ Delete				, , , , ,	-	☐ Change	Addition
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HOFMANN, MARTHA  STREET ADDRESS 617 N TAMIAMI TR #70 VENICE, FL  TITLE  MURRAY, CYNTHIA STREET ADDRESS 617 N TAMIAMI TRAIL #66 CITY-ST-ZIP VENICE, FL 34292  TITLE  DIV NAME HINDMARSH, MAUREEN STREET ADDRESS 617 N TAMIAMI TRAIL #28  DIV NAME HINDMARSH, MAUREEN STREET ADDRESS 617 N TAMIAMI TRAIL #28  STREET ADDRESS 617 N TAMIAMI TRAIL #28								' '	I V	•		
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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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

D

MITTELSTADT, SUE

STREET ADDRESS 617 N. TAMIAMI TRAIL., #146

VENICE, FL

TITLE

NAME

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

april6,06

×574-293-4310

Change

■ Addition

Daytime Phone #