## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9600000560

Entity Name: HARBOR LIGHTS ASSOCIATION, INC.

FILED Feb 12, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
9324 50TH TERRACE NO. ST. PETERSBURG, FL 33708					
Current Mailing Address:			New Mailir	New Mailing Address:	
9324 50TH TERRACE NO. ST. PETERSBURG, FL 33708					
FEI Number:	59-2088588	FEI Number Applied For ( )	El Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
PAVONE, E 9324 50TH SAINT PET	DENNIS TERR. NO. ERSBURG, FL	. 33708 US			
The above in the State		ubmits this statement for the purp	ose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () E BINGHAM, CARR 4830 92ND. LN. I SAINT PETERSB	NO.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E KNOP, ROBERT 9281 50TH AVEN ST. PETERSBUR	IUE NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ()E DWYER, CHARL 9101 46TH AVE. SAINT PETERSB	NO.	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition DWYER, CHARLES 9101 46TH AVE. NO. SAINT PETERSBURG, FL 33708	
Title: Name: Address: City-St-Zip:	D () E THORSON, LILLI 4984 HARBOR L SAINT PETERSB	IGHTS DR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition WROBEL, JOHN 9115 46TH AVE N SAINT PETERSBURG, FL 33708	
Title: Name: Address: City-St-Zip:	DRA () E PAVONE, DENNI 4639 92ND LN. N SAINT PETERSB	10.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FOLEY, ANN 9129 46TH AVE. N SAINT PETERSBURG, FL 33708	
Title: Name: Address: City-St-Zip:	D () E PEOPLES, GEOR 4838 91ST. LN. N SAINT PETERSB	10.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DENNIS PAVONE DRA 02/12/2009