

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 09, 2011
Secretary of State

Entity Name: HARBOR LIGHTS MOBILE OWNERS' RESORT, INC.

Current Principal Place of Business:

8618 EAST GOSPEL ISLAND ROAD
LOT 53
INVERNESS, FL 34450

New Principal Place of Business:

Current Mailing Address:

8618 EAST GOSPEL ISLAND ROAD
LOT 53
INVERNESS, FL 34450

New Mailing Address:

FEI Number: 52-2160289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICKER, JUNE
8618 EAST GOSPEL ISLAND ROAD
#53
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BARO, AGNES
Address: 8618 E. GOSPEL ISLAND RD #17
City-St-Zip: INVERNESS, FL 34450

Title: VP
Name: MACHNIK, JIM
Address: 8618 E. GOSPEL ISLAND ROAD #52
City-St-Zip: INVERNESS, FL 34450

Title: S
Name: RYAN, BARBARA
Address: 8618 E GOSPEL ISLAND RD #56
City-St-Zip: INVERNESS, FL 34450

Title: T
Name: MICKER, JUNE
Address: 8618 E.GOSPEL ISLAND RD #53
City-St-Zip: INVERNESS, FL 34450

Title: D
Name: BROTT, BRENDA
Address: 8618 E.GOSPEL ISLAND RD #48
City-St-Zip: INVERNESS, FL 34450

I hereby 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 all other like empowered.

SIGNATURE: JUNE MICKER

RA

03/09/2011

Electronic Signature of Signing Officer or Director

Date