

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90412 023 ***150.00

DOCUMENT # P02000053246

1. Entity Name
HARBOR HI-TECH HOMES, INC.



Principal Place of Business
**10616 SOUTH US HWY 1
PORT SAINT LUCIE, FL 34952**

Mailing Address
**10616 SOUTH US HWY 1
PORT SAINT LUCIE, FL 34952**

2. Principal Place of Business
1103 Snively Avenue

3. Mailing Address
P O Box 9227

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01152006 Chg-P CR2E034 (11/05)

City & State
Winter Haven, FL

City & State
Winter Haven, FL

4. FEI Number
03-0474864

Applied For
Not Applicable

Zip
33880

Country
USA

Zip
33883-9227

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**REICHART, JOSEPH F
10616 SOUTH US HWY 1
PORT SAINT LUCIE, FL 34952**

7. Name and Address of New Registered Agent

Name **REICHART, JOSEPH F**
Street Address (P.O. Box Number is Not Acceptable)
1103 SNIVELY AVENUE
City **WINTER HAVEN** FL Zip Code **33880**

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

Joseph F. Reichart, President

4/18/06

Signature, typed or printed name of registered agent and fee if applicable

DATE, Registered Agent signature required when renouncing

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

NAME PVTD REICHART, JOSEPH STREET ADDRESS 10616 S. US HIGHWAY ONE CITY & STATE PORT SAINT LUCIE, FL 34952	<input type="checkbox"/> Delete
NAME S REICHART, JOSEPH STREET ADDRESS 10616 SOUTH US HWY 1 CITY & STATE PORT SAINT LUCIE, FL 34952	<input type="checkbox"/> Delete
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Delete
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Delete
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Delete
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

NAME PVTD REICHART, JOSEPH STREET ADDRESS 1103 SNIVELY AVENUE CITY & STATE WINTER HAVEN, FL 33880	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME S REICHART, JOSEPH STREET ADDRESS 1103 SNIVELY AVENUE CITY & STATE WINTER HAVEN, FL 33880	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME STREET ADDRESS CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06 772.215.3202