

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054666

FILED  
Aug 08, 2004  
Secretary of State

Entity Name: GULF HARBOR HOMES OF FLORIDA, INC.

## Current Principal Place of Business:

5725 ASHTON WAY  
SARASOTA, FL 34241 US

## New Principal Place of Business:

5725 ASHTON WAY  
SARASOTA, FL 34231 US

## Current Mailing Address:

P O BOX 555  
KIRTLAND, NM 87417 US

## New Mailing Address:

FEI Number: 27-0058352      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUTCHCRAFT, BERNICE MARIE  
1541 BRAEBURN ROAD  
FORT MYERS, FL 33919 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHURE, PATRICIA A  
Address: P O BOX 555  
City-St-Zip: KIRTLAND, NM 87417 US

Title: VP ( ) Delete  
Name: WALKER, LAURA L  
Address: P O BOX 555  
City-St-Zip: KIRTLAND, NM 87417 US

Title: VP ( ) Delete  
Name: SHURE, RACHELLE L  
Address: P O BOX 807  
City-St-Zip: KIRTLAND, US 87417 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP/S (X) Change ( ) Addition  
Name: WALKER, LAURA L  
Address: P O BOX 555  
City-St-Zip: KIRTLAND, NM 87417 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA A. SHURE

P

08/08/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date