## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000093750

Name:

Address:

City-St-Zip:

Entity Name: HARBOUR INVESTMENT GROUP, INC

BEARRY, WILLIAM EDWA, RD, JR.

935 MIDWEST TRAIL N

LAKE ELMO, MN 55042

FILED Jul 06, 2004 Secretary of State

y	10.110.000	TO THE OTHER TO THE			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
869 QUEENS HARBOUR BLVD JACKSONVILLE, FL 32225				6728 BLANDING BLVD. JACKSONVILLE, FL 32244	
Current Mailing Address:			New Mailing Address:		
869 QUEENS HARBOUR BLVD JACKSONVILLE, FL 32225			P.O. BOX 441392 JACKSONVILLE, FL 32222		
FEI Number:	13-4262295	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
869 QUEE JACKSON The above	e of Florida.	25	urpose of changing its register	red office or registered agent, or both,	
	Electror	ic Signature of Registered Age	nt	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BEARRY, JOH	ARBOUR BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title <sup>.</sup>	STD (	Delete	Title <sup>.</sup>	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN EVAN BEARRY VD 07/06/2004