2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000050478

1. Entity Name MC HARBOR INVESTMENT CO.

Principal Place of Business

9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 US

Mailing Address

9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 US

FILED 08 APR 24 AM 7: 37 TALLAHASSEE, FLORIDA



03312008

No Chg-P

CR2E034 (11/05)

4. FEI Number 26-0082380

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and /	Address of	Current	Registered Agent

CORPDIRECT AGENTS, INC.

515 EAST PARK AVENUE TALLAHASSEE, FL 32301				IN THIS SPACE			
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finant Trust Fund Contribution.				\$5.00 May Be Added to Fees	·		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DELPONTI, JOHN SUITE 200 300125296393 S 5032 PARKWAY PLAZA BLVD., SUITE 200 04/23/0801026006 **946				00125296393 3/0801026006 **9463.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD PIERCY, TYLER 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				_	NOT WRITE		
NAME STREET ADDRESS CITY+ST-ZIP	131/24			IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				٠.			

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