

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000016998

1. Entity Name
HARBOUR OAKS INVESTMENTS CORPORATION



Principal Place of Business
**744 HIGHLAND AVE.
ORLANDO, FL 32803**

Mailing Address
**744 HIGHLAND AVE.
ORLANDO, FL 32803**



04192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FET Number
59-3232263

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**KELLER, CHARLES W
744 HIGHLAND AVE.
ORLANDO, FL 32803**

**DO NOT WRITE
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

(If a FET, Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**U000000147563
05/03/04-80112-002 150.00**

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	KELLER, CHARLES W
STREET ADDRESS	744 HIGHLAND AVE.
CITY ST ZIP	ORLANDO, FL 32802
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Charles W. Keller, Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Charles W. Keller

7/22/04

(407)342-5549

Use:

Date Filing #