


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Feb 10, 2006 08:00 A  
Secretary of State**

<b>DOCUMENT # P95000049608</b>	
1. Entity Name <b>HARBOUR BAY FURNITURE CO.</b>	

Principal Place of Business <b>3770 S.E. OCEAN BOULEVARD STUART, FL 34996</b>	Mailing Address <b>3770 SE OCEAN BLVD STUART, FL 34996 US</b>
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01232006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FCI Number <b>65-0592653</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>CAIN, LAWRENCE 3770 SE OCEAN BLVD STUART, FL 34996</b>
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**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 \_\_\_\_\_ 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

**U000000428510  
02/21/06-80051-007 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PT CAIN, LAWRENCE 184 NE EDGEWATER DR #1205 STUART, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	VPS CAIN, VIRGINIA 184 NE EDGEWATER DR #1205 STUART, FL
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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: Lawrence R. Cain **LAWRENCE R. CAIN** 1-25-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing