

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000062666

1. Entity Name
HARBOR HILLS SALES, INC.



Principal Place of Business
**6538 LAKE GRIFFIN ROAD
LADY LAKE, FL 32659**

Mailing Address
**6538 LAKE GRIFFIN ROAD
LADY LAKE, FL 32659**



04182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3343340

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RITCHEY, STEVEN J P.A.
1009 NORTH 14TH STREET
LEESBURG, FL 34748**

**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

(NOTE: Registered Agent signature required when reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FOREMAN, ALAN S
STREET ADDRESS	55 WHITNEY AVE., 5TH FLOOR
CITY-ST-ZIP	NEW HAVEN, CT 06510
TITLE	VPD
NAME	RICH, MICHAEL A
STREET ADDRESS	6538 LAKE GRIFFIN RD.
CITY-ST-ZIP	LADY LAKE, FL 32159
TITLE	STD
NAME	MILLER, LU ANN
STREET ADDRESS	6538 LAKE GRIFFIN RD.
CITY-ST-ZIP	LADY LAKE, FL 32159
TITLE	D
NAME	SWENSEN, DAVID F
STREET ADDRESS	55 WHITNEY AVE., 5TH FLOOR
CITY-ST-ZIP	NEW HAVEN, CT 06510
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/26/07-80104-007 150.00

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IN THIS SPACE**

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

4-18-07

Date

352/753-7000

Daytime Phone #