## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 16, 2007 08:00 Al Secretary of State DOCUMENT # P99000072870 HARBOUR COMMONS DEVELOPMENT, INC. Principal Place of Business Mailing Address 101 TAYLOR STREET 101 TAYLOR STREET PUNTA GORDA, FL 33950 PUNTA GORDA, FL 33950 CR2E034 (11/05) 04112007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0945081 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BERSON, CECIL T DO NOT WRITE 5650 ALMAR DR. PUNTA GORDA, FL 33950 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PT TITLE BERSON, CECIL NAME STREET ADDRESS 101 TAYLOR ST CITY-ST-ZIP PUNTA GORDA, FL 33950 **VS** BERSON, LINDA NAME STREET ADDRESS 101 TAYLOR ST 000000707467 04/24/07-80077-005 150.0p CITY-ST-ZIP PUNTA GORDA, FL 33950 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 air other like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

10/21- President

4/14/07 941639320

**FILED**