## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079197

Entity Name: HARBOUR RISK MANAGEMENT, LLC

**Current Principal Place of Business:** 

801 ANCHOR RODE DRIVE SUITE 103 NAPLES, FL 34103

## **Current Mailing Address:**

801 ANCHOR RODE DRIVE SUITE 103 NAPLES, FL 34103 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NOVATT, JEFF ESQ. 1415 PANTHER LANE SUITE 327 NAPLES, FL 34109 US

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.

SIGNATURE: JEFF NOVATT, ESQ. 03/21/2013

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

KASTROLL, WILLIAM H Name

801 ANCHOR RODE DRIVE, SUITE 103 Address

City-State-Zip: NAPLES FL 34103

SIGNATURE: WILLIAM H. KASTROLL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

03/21/2013

Date

**FILED** Mar 21, 2013

**Secretary of State** 

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