

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000039795

Entity Name: HARBOR AMERICA EAST INC.

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

21977 E. WALLIS DR
PORTER, TX 77365

New Principal Place of Business:

Current Mailing Address:

21977 E. WALLIS DR
PORTER, TX 77365

New Mailing Address:

FEI Number: 65-0674520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANUSCHAK, MICHAEL S
3120 JASMINE DR
DEL RAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: LOWERY, DOUGLAS L
Address: 2007 GOLDEN POND
City-St-Zip: KINGWOOD, TX 77345

Title: VP (X) Delete
Name: WITT, TERRY L
Address: 25810 HAVEN LAKE DRIVE
City-St-Zip: TOMBALL, TX 77375

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: LOWERY, DOUGLAS L
Address: 2007 GOLDEN POND
City-St-Zip: KINGWOOD, TX 77345

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS L. LOWERY

CEO

04/13/2009

Electronic Signature of Signing Officer or Director

Date