## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #716710** 1. Entity Name

## **FILED** Apr 25, 2007 8:00 am Secretary of State 04-25-2007 90167 038 \*\*\*\*61.25

1530 N.E. 105HI STREEL MIAMM SHORES, FL 33138  3ule: Apt. #, etc.		HARBOUR CLUB VILLAS CONDOMINIUM CORPORATION, INC.					
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.    Suite, Apt. 4, etc.    City & State   City & City & State   City & City & State   City & City & City & State   City & City & State   City & City & State   City & C	1530 N.E. 105TH STREET 15		1530 N.E. 105TH STREE	1530 N.E. 105TH STREET		79963	
Suite, Apt. 4, etc.    Suite, Apt. 4, etc.    Suite, Apt. 4, etc.    City & State   City & City							
City & State    City & State   City & State   City & State   4. FEI Number   559-13886944   Replied For   Not Applicable	2. Principal Place of Business - No P.O. Box #		3. Mailing Address			]	3,0
Sp. 1288694   No. Applicable   Sp. 1288694   Sp. 25 Additional   Sp. 1288694   Sp. 25 Additional   Sp. 2	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03052007 Ch	g-NP CR2E037 (12/0	06)
Country   Country   Country   Country   Country   S. Certificate of Status Desired   \$8.75 Additional Fee Required   Fee Req	City & State		City & State		4. FEI Number 59-1388694	4	
PAGLINO 8 DEGENHARDT, P.A. 2131 HOLLYWOOD BLVD SUITE 306 HOLLYWOOD, FL 33020  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and user applicable.  Priling Fee is \$61.25 Due by May 1, 2007  9. Election Companign Financing Addition Filing Fee is \$61.25 Due by May 1, 2007  9. Election Companign Financing Addition Filing Fee is \$61.25 Due by May 1, 2007  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE MANUS HORES, FL 33138  INTEL PRINCE AND FLORES, FL 33138  INTEL PRINCE AND FLORES, FL 33138  INTEL PRINCE AND FLORES, FL 33138  INTEL PRINCE AND FLORES AND FL	Zip	Country	Zip	Country		stus Desired S8.75	Additional
PAGLINO & DEGENHARDT, P.A. 2131 HOLLYWOOD RLV SUITE 306 HOLLYWOOD, FL 33020  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  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  Filing Fee is \$61.25  Due by May 1, 2007  9. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE NAME NAUGHTON, LINDA SIRET ADDRESS 1511 NE 105TH ST SIRET ADDRESS 1511 NE 105TH ST SIRET ADDRESS 1511 NE 105TH ST SIRET ADDRESS STORS, J. ROBERT NAME STORS, J. ROBERT NAME LAZO NE 105 ST.  DIRECTORS STORE STANDARD STREET ADDRESS TITLE NAME NAME NAMI, FL 33138  CITY-SI-2P  ITILE MOOREHEAD, THERESA MAME MAMI, FL 33138  CITY-SI-2P  ITILE MOOREHEAD, THERESA MAME MOOREHEAD, THERESA SIRET ADDRESS STREET ADDRESS TITLE MOOREHEAD, THERESA SIRET ADDRESS STREET ADDRESS TITLE MOOREHEAD, THERESA SIRET ADDRESS STREET ADDRE		6. Name and Address of Current	Registered Agent		7. Name and Addr		
Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  City  FL  Zip Code  City  City  FL  Zip Code  City  City  City  FL  Zip Code  City  City  City  FL  Zip Code  City  City  City  City  FL  Zip Code  City  Ci	<u> </u>			Name	-	•••	
B. 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, types or printed name of registered agent and allied applicable.   (NOTE Registered Agent Signature required when remaining)   DATE	2131 HOLLYWOOD BLVD SUITE 306 HOLLYWOOD, FL 33020			Street Address	s (P.O. Box Number is N	lot Acceptable)	
B. 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, injust or private name of registered agent and life if applicable   (NOTE Repowred April Signature required when remaining)   DATE				City		FI Zip	Code
SIGNATURE    Filling Fee is \$61.25   Due by May 1, 2007   Public Planting Properties Agent Signature required when remaining   S.5.00 May Be Added to Fees   Added to Fees   Florida Department of State	8. The above	named entity submits this statement for	or the purpose of changing its r	egistered office or regist	tered agent, or both, in t		with, and accept
Filing Fee is \$61.25 Due by May 1, 2007  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  NAUGHTON, LINDA 1511 NE 105TH ST NIME NAME NIME STORS, J. ROBERT STREET ADDRESS THEET ADDRESS THEET ADDRESS THEET ADDRESS THILE D. DEIde THILE D. DEIde THILE D. DEIde THILE D. DEIde THILE D. DEID DEID DEID DEID DEID THILE D. DEID DEID DEID DEID THILE D. DEID DEID DEID DEID DEID THILE D. DEID DEID DEID THILE D. DEID DEID DEID THILE D. DEID DEID THILE T. MAME STREET ADDRESS THEET ADD	the obligati	ions of registered agent.					
Filing Fee is \$61.25 Due by May 1, 2007  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE  NAUGHTON, LINDA 1511 NE 105TH ST NIME NAME NIME STORS, J. ROBERT STREET ADDRESS THEET ADDRESS THEET ADDRESS THEET ADDRESS THILE D. DEIde THILE D. DEIde THILE D. DEIde THILE D. DEIde THILE D. DEID DEID DEID DEID DEID THILE D. DEID DEID DEID DEID THILE D. DEID DEID DEID DEID DEID THILE D. DEID DEID DEID THILE D. DEID DEID DEID THILE D. DEID DEID THILE T. MAME STREET ADDRESS THEET ADD	SIGNATURE						
Due by May 1, 2007			and title if applicable. (NOTE	Registered Agent signature requi	ired when reinstating)	DATE	
TITLE		_	1	1 -			
NAME STREET ADDRESS 1511 NE 105TH ST STREET ADDRESS	10.		RECTORS	11.	ADDITIONS/CHANGE		
STREET ADDRESS CITY-ST-ZIP  MIAMI SHORES, FL 33138  CITY-ST-ZIP  MIAMI SHORES, FL 33138  CITY-ST-ZIP  TITLE  P STOBS, J. ROBERT  NAME STREET ADDRESS CITY-ST-ZIP  MIAMI, FL 33138  CITY-ST-ZIP  NAME LACOMBE, RAYMOND STREET ADDRESS CITY-ST-ZIP  MIAMI, FL 33138  CITY-ST-ZIP  NAME MOOREHEAD, THERESA STREET ADDRESS CITY-ST-ZIP  MOOREHEAD, THERESA STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  MIAMI, FL 33138  CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  Change Addition NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  Change Addition NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  Change Addition NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  Change Addition NAME STREET ADDRESS CITY-ST-ZIP  Ch	TITLE		☐ Delete			☐ Cha	nge 🔲 Addition
TITLE	STREET ADDRESS	· ·		INVAIL			
NAME STOBS, J. ROBERT	l !	MIAMI SHORES, FL 33138		STREET ADDRESS			
STREET ADDRESS   CITY-ST-ZIP	CITY-ST-ZIP						
CITY-ST-ZIP	TITLE	1 -	Delete	CITY-ST-ZIP		Cha	inge 🔲 Addition
NAME   LACOMBE, RAYMOND   NAME   STREET ADDRESS   CITY-ST-ZIP   MIAMI, FL 33138   CITY-ST-ZIP   Change   Addition   A	TITLE NAME	STOBS, J. ROBERT	☐ Defete	CITY-ST-ZIP TITLE NAME		☐ Cha	inge 🔲 Additioл
1500 NE 105 STREET ADDRESS   1500 NE 105 STREET	TITLE	STOBS, J. ROBERT 1420 NE 105 ST.	☐ Delete	CITY-ST-ZIP  TITLE NAME STREET ADDRESS		☐ Cha	inge Addition
CITY-ST-ZIP MIAMI, FL 33138	TITLE NAME STREET ADDRESS	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138 D		CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			
NAME         MOOREHEAD, THERESA         NAME           STREET ADDRESS         1561 NE 105TH ST.         STREET ADDRESS           CITY-ST-ZIP         MIAMI, FL 33138         CITY-ST-ZIP           TITLE         D         Delete         TITLE           NAME         DORFMAN, DAVID         NAME           STREET ADDRESS         1616 NE 105 ST.         STREET ADDRESS           CITY-ST-ZIP         MIAMI, FL 33138         CITY-ST-ZIP           TITLE         D         Delete         TITLE           NAME         JANOWITZ, SAM         NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138 D LACOMBE, RAYMOND		CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME			
NAME         MOOREHEAD, THERESA         NAME           STREET ADDRESS         1561 NE 105TH ST.         STREET ADDRESS           CITY-ST-ZIP         MIAMI, FL 33138         CITY-ST-ZIP           TITLE         D         Delete         TITLE           NAME         DORFMAN, DAVID         NAME           STREET ADDRESS         1616 NE 105 ST.         STREET ADDRESS           CITY-ST-ZIP         MIAMI, FL 33138         CITY-ST-ZIP           TITLE         D         Delete         TITLE           NAME         JANOWITZ, SAM         NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138 D LACOMBE, RAYMOND 1500 NE 105 STREET		CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS			
CITY-ST-ZIP MIAMI, FL 33138 CITY-ST-ZIP  TITLE DORFMAN, DAVID NAME DORFMAN, DAVID NAME  STREET DORESS CITY-ST-ZIP MIAMI, FL 33138 CITY-ST-ZIP  TITLE D DORFMAN, DAVID NAME  JANOWITZ, SAM Delete TITLE NAME  JANOWITZ, SAM	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138 D LACOMBE, RAYMOND 1500 NE 105 STREET MIAMI, FL 33138	□ Delete	CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP		[] Cha	inge Addition
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NAME         DORFMAN, DAVID         NAME           STREET ODRESS         1616 NE 105 ST.         STREET ADDRESS           CITY-ST-ZIP         MIAMI, FL 33138         CITY-ST-ZIP           TITLE         D         Delete         TITLE           NAME         JANOWITZ, SAM         NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138 D LACOMBE, RAYMOND 1500 NE 105 STREET MIAMI, FL 33138 T MOOREHEAD, THERESA 1561 NE 105TH ST.	□ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP		[] Cha	inge Addition
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NAME JANOWITZ, SAM NAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138  D LACOMBE, RAYMOND 1500 NE 105 STREET MIAMI, FL 33138  T MOOREHEAD, THERESA 1561 NE 105TH ST. MIAMI, FL 33138  D DORFMAN, DAVID 1616 NE 105 ST.	□ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS		☐ Cha	ange Addition
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CITY-ST-ZIP MIAMI, FL 33138 CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP Property certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. Liturther certify that the information	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STOBS, J. ROBERT 1420 NE 105 ST. MIAMI, FL 33138  D LACOMBE, RAYMOND 1500 NE 105 STREET MIAMI, FL 33138  T MOOREHEAD, THERESA 1561 NE 105TH ST. MIAMI, FL 33138  D DORFMAN, DAVID 1616 NE 105 ST. MIAMI, FL 33138  D JANOWITZ, SAM 1504 NE 105 ST.	☐ Delete ☐ Delete ☐ Delete	CITY-ST-ZIP  TITLE  NAME STREET ADDRESS		Cha	ange Addition  Addition  Addition

Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Filinda 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 617, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR