135945

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Amend as.12.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HARBOR ESTATES ASSOCIATES, IN
DOCUMENT NUMBER: 735945
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARYL A. GRANDSIRB, SEC/TRES (Name of Contact Person)
HARBOR ESTATES HOA
329 S.W. HARBOR ST.
STUART, FL 34997 (City/ State and Zip Code)
GRANDSIRBM @ BELL SOUTH. NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARYL A. GRANDSIRE at 772, 260-3000 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

HARBOR BSTATES ASSOCIATES, INC
(Name of Corporation as currently filed with the Florida Dept. of State)
7 <i>35945</i>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The neThe neThe ne
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS STUART, FL 34997
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 57UART, FL 34997
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: MARYL A. GRANDSIRE 329 5. W. HARBOR 57. (Florida street address)
New Registered Office Address: STUART, Florida 34997 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add		Doe Jones Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove	<u>P</u> Z_	PAMELA WILSON	2725,W. ST. LUCIE ST. STUART, FL 34997
2) Change Add	<u>VP</u>	SUSAN STEEN	385 S.W. ST. LUCIE ST. STUART, FL 34997
Remove 3) Change Add	PD	MATTHEW PRICE	525 S.W. HARBOR ST STUART, FL34997
Remove 4) Change Add Remove	VP	DARIN IVES	2715.W. ST. LUCIE ST. STUART, FL 34997
5) Change Add	<u> </u>	JAMES BROWN	270 S.W. HARBOR ST. STUART, FL 34997
Remove 6) Change Add		DONNA Mc GLYNN	630 S.W. HARBOR ST. STUART, FL 34997
Remove			

Harbor Estates board members for 2014

Jim Brown 772-233 4506 <u>Jimb4591@gmail.com</u>

MAryl Grandsire 772-260-3000 grandsirem@bellsouth.net

Darin Ives 772-341-1015 ivesgotit@bellsouth.net

Donna McGlynn 954-439-4114 donnajackmc@gmail.com

Matt Price 772-521-2357 matt@covenantfellowship.com

E. If amending or adding additional Articles, enter change(s) here:					
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A					

	e date of each amendment(s) adoption: 2/1/14	, if other than the
	e this document was signed. Sective date if applicable: 2/1/14	
2211	(no more than 90 days after amendment file date)	
Ad	option of Amendment(s) (CHECK ONE)	
X	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 2/7/14 Signature Warul a Landure	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	MARYL A. GRANDSIRE (Typed or printed name of person signing)	
	SECRETARY TREASURER DIRECTOR (Title of person signing)	