

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763406

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: HARBOUR NORTH CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

4636 HARBOUR NORHT COURT  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

4636 HARBOUR NORHT COURT  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 59-2189960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HIBBARD, SANDRA E  
4636 HARBOUR NORTH CT.  
JACKSONVILLE, FL 32225 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HIBBARD, SANDRA E  
Address: 4636 HARBOUR NORTH CT  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VD ( ) Delete  
Name: HELLSINGER, ANN  
Address: 11139 SAIL POINT LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD ( ) Delete  
Name: O'NEIL, KATHE  
Address: 4510 BEACON DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD ( ) Delete  
Name: CLOCKDALE, LAURA  
Address: 1114 SAIL POINT LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: HEUSINGER, ANN  
Address: 11139 SAIL POINT LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD (X) Change ( ) Addition  
Name: O'NEIL, KATHIE  
Address: 4510 BEACON DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD (X) Change ( ) Addition  
Name: CLOCKDALE, LAURA  
Address: 11114 SAIL POINT LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Change (X) Addition  
Name: WITTMER, LARRY  
Address: 11307 BEACON DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA E. HIBBARD

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date