

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005097

FILED
Apr 02, 2008
Secretary of State

Entity Name: HARBORVIEW GRANDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

530 S GULFVIEW BLVD
CLEARWATER, FL 33767 US

New Principal Place of Business:

Current Mailing Address:

C/O RESOURCE PROPERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 20-2847753 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 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: P () Delete
Name: WARE, RANDY
Address: 530 S GULFVIEW BLVD #706
City-St-Zip: CLEARWATER, FL 33767

Title: VP () Delete
Name: LINARES, ANTHONY
Address: 530 S GULFVIEW BLVD #804
City-St-Zip: CLEARWATER, FL 33767

Title: T () Delete
Name: KUIJTEN, JOHN
Address: 530 S GULFVIEW BLVD #507
City-St-Zip: CLEARWATER, FL 33767

Title: S () Delete
Name: STEINLAGE, MADONNA
Address: 530 S GULFVIEW BLVD #501
City-St-Zip: CLEARWATER, FL 33767

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GERACI, CHARLES
Address: 530 S GULFVIEW BLVD #603
City-St-Zip: CLEARWATER, FL 33767

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

Title: S (X) Change () Addition
Name: ROWLAND, MILAM
Address: 530 S GULFVIEW BLVD #602
City-St-Zip: CLEARWATER, FL 33767

Title: D () Change (X) Addition
Name: KLEEMAN, PAUL
Address: 530 GULFVIEW BLVD #401
City-St-Zip: CLEARWATER, FL 33767

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: RANDY WARE

P/D

04/02/2008

Electronic Signature of Signing Officer or Director

Date