

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005097

FILED
Apr 17, 2009
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:

C/O RESOURCE PROPERTY MGMT
28100 US HWY 19 N.SUITE 205
CLEARWATER, FL 33761 US

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:

RESOURCE PROPERTY MGMT
28100 U.S. HWY 19 NO.
205
CLEARWATER, FL 33761 US

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:

04/17/2009

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: GERACI, CHARLES
Address: 530 S GULFVIEW BLVD #603
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 (X) Delete
Name: ROWLAND, MILAM
Address: 530 S GULFVIEW BLVD #602
City-St-Zip: CLEARWATER, FL 33767

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MILAM, ROWLAND
Address: 530 S GULFVIEW BLVD #702
City-St-Zip: CLEARWATER, FL 33767

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

Title: DS (X) Change () Addition
Name: NORMAN, STEWART
Address: 530 S GULFVIEW BLVD #705
City-St-Zip: CLEARWATER, FL 33767

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

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

SIGNATURE: ROWLAND MILAM

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date