

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002811

FILED
Mar 07, 2012
Secretary of State

Entity Name: THE HARVEST RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

2900 SW 87TH TERRACE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

2900 SW 87TH TERRACE
DAVIE, FL 33328

New Mailing Address:

FEI Number: 59-2031716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 SOUTH PINE ISLAND ROAD SUITE 540
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

BAKALAR & ASSOCIATES
150 SOUTH PINE ISLAND ROAD SUITE 540
PLANTATION, FL 33324 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: SUSAN BAKALAR, PA

03/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SANTILLI, LISA
Address: 2901 SW 87TH AVENUE #604
City-St-Zip: DAVIE, FL 33328

Title: VP
Name: LANDI, MARY
Address: 2821 SW 87TH AVE #801
City-St-Zip: DAVIE, FL 33328

Title: SD
Name: PHIL, FORTMAN
Address: 8711 SW 30TH STREET
City-St-Zip: DAVIE, FL 33328

Title: TD
Name: RONBINSON, ROSEMARY
Address: 2961 SW 87TH AVE #306
City-St-Zip: DAVIE, FL 33328

Title: D
Name: RODRIGUEZ, DAVE
Address: 2901 SW 87TH AVENUE #607
City-St-Zip: DAVIE, FL 33328

Title: D
Name: EAGAN, ANDREA
Address: 2910 SW 87TH TERRACE
City-St-Zip: DAVIE, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: LISA SANTILLI

PRES

03/07/2012

Electronic Signature of Signing Officer or Director

Date