

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35330

FILED
Feb 12, 2010
Secretary of State

Entity Name: HARBORVIEW AT FISHER ISLAND CONMDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ONE FISCHER ISLAND DRIVE
ONE FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109 US

New Principal Place of Business:

ONE FISHER ISLAND DRIVE
ONE FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109 US

Current Mailing Address:

C/O THE BOTTOM LINE
7501 BRIGANTINE LANE
POMPANO BEACH, FL 33067 US

New Mailing Address:

C/O ALICIA ORASI
3515 S. OLIVE AVE
WEST PALM BEACH, FL 33405

FEI Number: 65-0158755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYMAN, MIKE
150 WEST FLAGLER ST
27TH FLOOR
MIAMI, FL 33130 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
Name: HAI, ANTHONY
Address: 4512 FISHER ISLAND DR
City-St-Zip: FISHER ISLAND, FL 33109

Title: TD
Name: SCHWARTZ, JERRY
Address: 4712 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109

Title: SD
Name: CARSON, JUDITH
Address: 4711 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109

Title: VMBR
Name: SCHWARTZ, JERRY
Address: 4712 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109

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: ALICIA ORASI

CAM

02/12/2010

Electronic Signature of Signing Officer or Director

Date