2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# 721108

Entity Name: HARBOUR HILL CONDOMINIUM APARTMENTS ASSOCIATION, INC.

Current Principal Place of Business:

700 BEACH DRIVE, N.E.
SAINT PETERSBURG, FL 337012646

New Principal Place of Business:

Current Mailing Address:

700 BEACH DRIVE, N.E.
SAINT PETERSBURG, FL 337012646

New Mailing Address:

FEI Number: 59-1428703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAXWELL, HERB
700 BEACH DR NE
SAINT PETERSBURG, FL 33702646 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:	SD	( ) Delete
Name:	SANTORO, LINDA J	
Address:	700 BEACH DR NE	
City-St-Zip:	ST PETERSBURG, FL 33701	
Title:	VPD	( ) Delete
Name:	KARINS, JOAN	
Address:	700 BEACH DR NE	
City-St-Zip:	ST PETERSBURG, FL 33701	
Title:	D	( ) Delete
Name:	JEFFRIES, ELIZABETH	
Address:	700 BEACH DR NE 407	
City-St-Zip:	ST PETERSBURG, FL	
Title:	PD	( ) Delete
Name:	MAXWELL, HERBERT	
Address:	700 BEACH DR NE	
City-St-Zip:	ST PETERSBURG, FL 33701	
Title:	D	( ) Delete
Name:	GLYNN, TOM	
Address:	700 BEACH DR NE	
City-St-Zip:	SAINT PETERSBURG, FL 33701	
Title:	TC	( ) Delete
Name:	CAVINESS, ANN N	
Address:	700 BEACH DR. NE	
City-St-Zip:	SAINT PETERSBURG, FL 33701	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	CECIRE, NICK	
Address:	700 BEACH DR NE	
City-St-Zip:	ST PETERSBURG, FL 33701	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: HERB MAXWELL P 04/24/2008

Electronic Signature of Signing Officer or Director — Date