

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001061

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** HARBOR COVE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

G.R.S. MANAGEMENT ASSOCIATES, INC.  
3900 WOODLAKE BLVD #309  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

G.R.S. MANAGEMENT ASSOCIATES, INC.  
3900 WOODLAKE BLVD #309  
LAKE WORTH, FL 33463

**New Mailing Address:**

**FEI Number:** 65-1022912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ST. JOHN ROSSIN BURR & LEMME, PLLC  
1601 FORUM PLACE  
701  
WEST PALM BEACH, FL 33401 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: HANDERHAN, MICHAEL  
Address: 9142 BAY HARBOUR CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VPD  
Name: WILLIAM, CONNOR  
Address: C/O 3900 WOODLAKE BLVD SUITE 309  
City-St-Zip: LAKE WORTH, FL 33463

Title: T  
Name: CASPARI, HELENE  
Address: 9066 BAYHARBOUR CIR  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: DS  
Name: GREEN, DORI  
Address: 9043 BAY HARBOR CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D  
Name: WIENER, MICHAEL  
Address: C/O 3900 WOODLAKE BLVD SUITE 309  
City-St-Zip: LAKE WORTH, FL 33463

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: MICHAL HANDERHAN

PD

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date