

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 716048

**Entity Name:** HARBOUR CLUB CONDOMINIUM NO. ONE, INC.

**Current Principal Place of Business:**

7800 66TH STREET N  
205  
PINELLAS PARK, FL 33781

**Current Mailing Address:**

CONDOMINIUM MANAGEMENT GROUP  
7800 66TH STREET N 205  
PINELLAS PARK, FL 33781 US

**FEI Number:** 59-1456357

**Certificate of Status Desired:** No

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

CONDOMINIUM MANAGEMENT GROUP  
7800 66TH STREET N  
205  
PINELLAS PARK, FL 33781 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:** RONALD D WELTON

**12/06/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name THOMPSON, DALE  
Address 7800 66TH STREET N  
205  
City-State-Zip: PINELLAS PARK FL 33781

Title TREASURER  
Name LAFEVER, BARBARA  
Address 7800 66TH STREET N  
205  
City-State-Zip: PINELLAS PARK FL 33781

Title DIRECTOR  
Name LUCENT, JOSEPH  
Address 7800 66TH STREET N  
205  
City-State-Zip: PINELLAS PARK FL 33781

Title P  
Name BARBUSH, KATHERINE  
Address 7800 66TH STREET N  
205  
City-State-Zip: PINELLAS PARK FL 33781

Title DIRECTOR  
Name TETI, GAIL  
Address 7800 66TH STREET N  
205  
City-State-Zip: PINELLAS PARK FL 33781

Title SECRETARY  
Name COHEN, VICKIE  
Address CONDOMINIUM MANAGEMENT  
GROUP  
7800 66TH STREET N 205  
City-State-Zip: PINELLAS PARK FL 33781

*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:** KATHERINE BARBUSH

**P**

**12/06/2016**

Electronic Signature of Signing Officer/Director Detail

Date