

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745713

Entity Name: HARBOURWOOD HOMEOWNERS ASSOCIATION OF
HALLANDALE, INC.**Current Principal Place of Business:**533 LESLIE DRIVE
HALLANDALE, FL 33009**Current Mailing Address:**533 LESLIE DRIVE
HALLANDALE, FL 33009 US**FEI Number: 59-2014439****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BRADFORD J. BEILLY P.A.
1144 S.E. 3RD STREET
FORT LAUDERDALE, FL 33316 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	GURTMAN, DAVID
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	TD
Name	ROSEN, JUDITH
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	D
Name	RICE, PEGGY
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	DIRECTOR
Name	CROFT, ARLENE
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	VPD
Name	FRIEDLANDER, STANLEY
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	SD
Name	RABBINER, ARTHUR
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	D
Name	DADDARIO, VICTOR
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

Title	DIRECTOR
Name	SCHATKEN, NANCY
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009

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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: DAVID GURTMAN**PRESIDENT****01/22/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GLUCKMAN, RICHARD
Address	533 LESLIE DRIVE
City-State-Zip:	HALLANDALE FL 33009