2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760905

Entity Name: THE HARBOURAGE II CONDOMINIUM ASSOCIATION, INC.

FILED Feb 27, 2019 Secretary of State 9705532133CC

Current Principal Place of Business:

240 SAND KEY ESTATES DR, CLEARWATER. FL 33767

Current Mailing Address:

C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 301 SAINT PETERSBURG. FL 33702 US

FEI Number: 59-2214816 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST C/O ASSOCIA GULF COAST 9887 4TH STREET NORTH SUITE 301 SAINT PETERSBURG, FL 33702 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: JOHN HENSLEY 02/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name VENUTI, TONY Name BURDEK, DICK

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 301 9887 4TH STREET NORTH SUITE 301

City-State-Zip: SAINT PETERSBURG FL 33702 City-State-Zip: SAINT PETERSBURG FL 33702

Title TREASURER Title SECRETARY

Name JACKSON, NORWOOD Name DIMEO, MARYANNE

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 301 9887 4TH STREET NORTH SUITE 301 SAINT PETERSBURG FL 33702 City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR Title DIRECTOR

Name KORSMEYER, MARK Name MELTON, SHARON

Address C/O ASSOCIA GULF COAST Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 301 9887 4TH STREET NORTH SUITE 301

City-State-Zip: SAINT PETERSBURG FL 33702 City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR

City-State-Zip:

Name STAMATOGLOU, SYLVIA

Address C/O ASSOCIA GULF COAST

9887 4TH STREET NORTH SUITE 301

City-State-Zip: SAINT PETERSBURG FL 33702

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: TONY VENUTI PRESIDENT 02/27/2019