

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764343

**FILED  
Jan 29, 2013  
Secretary of State  
CC8301971358**

**Entity Name:** MELBOURNE HARBOR PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O THOMAS J KASICA, CPA  
2210 FRONT ST STE 301  
MELBOURNE, FL 32901

**Current Mailing Address:**

C/O THOMAS J KASICA, CPA  
2210 FRONT ST STE 301  
MELBOURNE, FL 32901 US

**FEI Number: 59-2580028**

**Certificate of Status Desired: No**

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

WOOD, GREGORY T  
2210 FRONT ST  
STE 202  
MELBOURNE, FL 32901 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 D  
Name HAWKES, RICHARD  
Address 2293 W EAU GALLIE BLVD  
City-State-Zip: MELBOURNE FL 32935

Title P  
Name WOOD, GREGORY T  
Address 2210 FRONT STREET, SUITE 202  
City-State-Zip: MELBOURNE FL 32901

Title T  
Name HYNES, BONNEY  
Address 2200 FRONT STREET  
City-State-Zip: MELBOURNE FL 32901

Title S  
Name BILL, DENNEHY  
Address 2210 FRONT STREET, SUITE 301  
City-State-Zip: MELBOURNE FL 32901

Title VP  
Name PAUL, HOWARD  
Address 2210 FRONT STREET, SUITE 301  
City-State-Zip: MELBOURNE FL 32901

Title D  
Name CLARK, COY  
Address 2210 FRONT STREET, SUITE 301  
City-State-Zip: MELBOURNE FL 32901

*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: GREGORY T. WOOD**

**PRESIDENT**

**01/29/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date