

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004440

Entity Name: HARBOR PLACE VISTAS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**14815-14819 LAGUNA DRIVE
FORT MYERS, FL 33908**Current Mailing Address:**C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD SUITE 229
BONITA SPRINGS, FL 34134 US**FEI Number:** 65-1073528**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C/O DETALI & ASSOCIATES
C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD SUITE 229
BONITA SPRINGS, FL 34134 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:** DEBI TALIAFERRO

04/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ZELUBOWSKI, BRIAN
Address C/O DETALI ASSOC
27499 RIVERVIEW CENTER BLVD
SUITE 229
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name HERDRICH, BILL
Address C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD
SUITE 208
City-State-Zip: BONITA SPRINGS FL 34134

Title P, PRESIDENT
Name HANLON, LUCILLE
Address C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD
SUITE 229
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name DONOHUE, GARY
Address C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD
SUITE 229
City-State-Zip: BONITA SPRINGS FL 34134

Title SECRETARY, TREASURER
Name HUSTWICK, JOAN
Address C/O DETALI & ASSOC
27499 RIVERVIEW CENTER BLVD
SUITE 229
City-State-Zip: BONITA SPRINGS FL 34134

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: LUCILLE HANLON

PRESIDENT

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date