

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000001787

**Entity Name:** HARBOUR HOUSE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

825 NE 1ST. STREET  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

BEACH HOUSE ASSOCIATION SERVICES LLC  
455 NE 5TH AVE SUITE D-307  
DELRAY BEACH, FL 33483 US

**FEI Number:** 05-0627786

**Certificate of Status Desired:** Yes

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

JOHNSON, JEFFREY A  
455 NE 5TH AVE  
SUITE D-307  
DELRAY BEACH, FL 33483 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 DP  
Name LEINER, BRUCE  
Address 825C NE 1ST ST.  
City-State-Zip: DELRAY BEACH FL 33483

Title DV  
Name GERRY, ROBYN  
Address 825 NE 1ST ST  
SUITE D  
City-State-Zip: DELRAY BEACH FL 33483

Title PM  
Name KEEGAN, MICHAEL D  
Address 777 E. ATLANTIC AVE SUITE C-307  
City-State-Zip: DELRAY BEACH FL 33483

*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:** MICHAEL KEEGAN

**ASSOCIATION MANAGER** 01/24/2017

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

\_\_\_\_\_  
Date