

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

DOCUMENT# N05102

**Entity Name:** THE HARBOR VILLAGE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CCM, INC  
7124 N NOB HILL RD  
TAMARAC, FL 33321

**Current Mailing Address:**

C/O CCM, INC  
7124 N NOB HILL RD  
TAMARAC, FL 33321 US

**FEI Number:** 59-2446390

**Certificate of Status Desired:** No

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

LAW OFFICE ROBERT P. KELLY C/O R. PICKLES  
2514 HOLLYWOOD BLVD  
STE 307  
HOLLYWOOD, FL 33020 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 P  
Name CARR, MARIANNE  
Address 7124 N NOB HILL RD  
City-State-Zip: TAMARAC FL 33321

Title VP  
Name ROSENTHAL, BARRY  
Address 7124 N NOB HILL RD  
City-State-Zip: TAMARAC FL 33321

Title S, T  
Name LANIER, ROBERT  
Address 7124 N NOB HILL RD  
City-State-Zip: TAMARAC FL 33321

Title D  
Name GREENBERG, MICHAEL  
Address 7124 N NOB HILL RD  
City-State-Zip: TAMARAC FL 33321

Title D  
Name LEIBOVICI, ZVI  
Address 7124 N NOB HILL RD  
City-State-Zip: TAMARAC FL 33321

*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:** MARIANNE CARR

P

03/27/2013

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

\_\_\_\_\_  
Date