

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006259

Entity Name: HARBOR RIDGE OF PALM HARBOR HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 18, 2022
Secretary of State
5795697535CC**Current Principal Place of Business:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763**Current Mailing Address:**24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 US**FEI Number: 37-1566115****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOVETERE, JULIE
24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 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: JULIE LOVETERE****03/18/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DIR
Name MCNEILL, DANIEL
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** SD
Name BAKER, BRENDA
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** VPD
Name BURNS, BARBARA
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** TD
Name NEWTON, MICHAEL
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763**Title** PD
Name O'SHEA, JOHN
Address 24701 US HIGHWAY 19 N
SUITE 102
City-State-Zip: CLEARWATER FL 33763

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: JOHN O'SHEA**PD****03/18/2022**

Electronic Signature of Signing Officer/Director Detail

Date