2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32826

Entity Name: THE HARBOURS AT ABERDEEN CONDOMINIUM, INC.

FILED Mar 23, 2020 Secretary of State 4445690059CC

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES, INC 3900 WOODLAKE BLVD STE 309 LAKE WORTH, FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES, INC 3900 WOODLAKE BLVD STE 309 LAKE WORTH, FL 33463 US

FEI Number: 65-0140620 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUNHA, JENNIFER M 601 HERITAGE DR. SUITE 424

JUPITER, FL 33458 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: JENNIFER CUNHA 03/23/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT, TREASURER Title VΡ

Name MORTON, JOHN G Name DIENSTAG, BERNARD

Address 3900 WOODLAKE BLVD Address C/O GRS MANAGEMENT SUITE 309

ASSOCIATES, INC

3900 WOODLAKE BLVD STE 309 LAKE WORTH FL 33463

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip:

Title DIRECTOR

DIRECTOR Title Name GAUTHIER, RICHARD

SANTO, MYRON Name Address C/O GRS MANAGEMENT

ASSOCIATES, INC C/O GRS MANAGEMENT Address

3900 WOODLAKE BLVD STE 309 ASSOCIATES, INC

3900 WOODLAKE BLVD STE 309 LAKE WORTH FL 33463 City-State-Zip: City-State-Zip: LAKE WORTH FL 33463

Title **SECRETARY**

Title **DIRECTOR** Name LATMAN, WENDY

Name CEASAR, MICHAEL Address C/O GRS MANAGEMENT

> ASSOCIATES, INC Address C/O GRS MANAGEMENT

3900 WOODLAKE BLVD STE 309 ASSOCIATES, INC

3900 WOODLAKE BLVD STE 309 LAKE WORTH FL 33463 City-State-Zip:

City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR

PANDOLFO, MICHAEL Name

Address C/O GRS MANAGEMENT ASSOCIATES, INC

3900 WOODLAKE BLVD STE 309

City-State-Zip: LAKE WORTH FL 33463

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.

PRESIDENT 03/23/2020 SIGNATURE: JOHN MORTON