2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004039

Entity Name: THE HOMEOWNERS' ASSOCIATION OF HARBOUR ISLES, INC.

FILED
Jan 17, 2017
Secretary of State
CC0258584513

Current Principal Place of Business:

700 HARBOUR ISLES DRIVE NORTH PALM BEACH. FL 33410

Current Mailing Address:

P.O. BOX 7303 JUPITER, FL 33468

FEI Number: 59-3586636 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GELFAND, MICHAEL J. ESQ. 1555 PALM BEACH LAKES BLVD. SUITE 1220 WEST PALM BEACH, FL 33401 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: MICHAEL J. GELFAND, ESQ.

01/17/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitleDIRECTORTitleTREASURERNameMORGAN, KENNameHAESEKER, HANK

Address 821 HARBOUR ISLES PLACE Address 808 HARBOUR ISLES PLACE
City-State-Zip: NORTH PALM BEACH FL 33410 City-State-Zip: NORTH PALM BEACH FL 33410

Title SECRETARY Title VP

Name GRIESMER, PAUL Name FOX, ANDREW

Address 817 HARBOUR ISLES PLACE Address 812 HARBOUR ISLES PLACE

City-State-Zip: NORTH PALM BEACH FL 33410 City-State-Zip: NORTH PALM BEACH FL 33410

Title PRESIDENT

Name STARACE, LOUIS DR.

Address 788 HARBOUR ISLES PLACE

City-State-Zip: NORTH PALM BEACH FL 33410

SIGNATURE: MICHAE J. GELFAND

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.

Electronic Signature of Signing Officer/Director Detail

REGISTERED AGENT

01/17/2017