

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701976

FILED
Jan 25, 2008
Secretary of State

Entity Name: HARBOR HILLS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1669 CLEARWATER HARBOR DR
LARGO, FL 33779

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1121
LARGO, FL 33779

New Mailing Address:

FEI Number: 59-6174810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONATHAN JAMES DAMONTE, CHARTERED
12110 SEMINOLE BLVD.
LARGO, FL 33778 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: NAVARRO, JOE
Address: 1565 HARBOR HILLS DR
City-St-Zip: LARGO, FL 33770

Title: V () Delete
Name: MCFADDEN, MICHAEL
Address: 4490 CLEARWATER HARBOR DR.
City-St-Zip: LARGO, FL 33770

Title: P () Delete
Name: KUNZ, JOSEPH
Address: 3789 HIGH BLUFF DRIVE
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: HESS, WILLIAM
Address: 1232 HIGH BLUFF DR
City-St-Zip: LARGO, FL 33770

Title: T () Delete
Name: BOWERSOX, BETTY
Address: 1669 CLEARWATER HARBOR DR
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: HOLLOWAY, CHUCK
Address: 1264 HIGH BLUFF DR W
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: JOHNSON, RICHARD F MD
Address: 4548 CLEARWATER HARBOR DRIVE SOUTH
City-St-Zip: LARGO, FL 33770

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD F JOHNSON

T

01/25/2008

Electronic Signature of Signing Officer or Director

Date