

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90049 027 \*\*\*\*61.25

**DOCUMENT # 724133**

1. Entity Name

HARBOUR HALL CONDOMINIUM ASSOCIATION, INC.#3



Principal Place of Business

640 NE 6 CT  
BOYNTON BCH FL 33435  
US

Mailing Address

640 NE 6 CT  
BOYNTON BCH FL 33435  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1482638

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUMPHRIES, LINDA  
637 NE 6TH COURT  
L  
BOYNTON BEACH FL 33435

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	RICE, MICHELLE	
STREET ADDRESS	640 NE 6TH COURT #R	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input type="checkbox"/> Delete
NAME	HUMPHRIES, LINDA	
STREET ADDRESS	637 NE 6TH COURT APT A	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	WHITE, DONALD	
STREET ADDRESS	640 NE 6TH COURT APT H	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HEAVLIN, JEANNE	
STREET ADDRESS	734 NE 9TH AVE	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HARNER, STEVE	
STREET ADDRESS	6073 ARLINGTON ROAD	
CITY-ST-ZIP	FALLS CHURCH VA 22044	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	GONZALES, GLADYS	
STREET ADDRESS	424 N.W. 13TH STREET	
CITY-ST-ZIP	DELRAY FL 33444	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wes Krasno	
STREET ADDRESS	623 NE 6th Ct. # 2H	
CITY-ST-ZIP	Boynton Bch. FL 33435	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Linda Humphries	
STREET ADDRESS	637 NE 6th Ct. Apt A	
CITY-ST-ZIP	Boynton Beach FL 33435	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Harry Swain	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Guy Drouin	
STREET ADDRESS	637 N.E. 6th Ct. # G	
CITY-ST-ZIP	Boynton Bch. FL 33435	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Alfred Horn	
STREET ADDRESS	637 N.E. 6th Ct. # H	
CITY-ST-ZIP	Boynton Bch. FL 33435	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #