

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 21, 2006
Secretary of State

DOCUMENT# 725977

Entity Name: HARBOUR VIEW CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**143 YACHT CLUB DR.
#17
N. PALM BEACH, FL 33408 US**New Principal Place of Business:**143 YACHT CLUB DR.
N. PALM BEACH, FL 33408 US**Current Mailing Address:**143 YACHT CLUB DR.
#17
N. PALM BEACH, FL 33408 US**New Mailing Address:**664 ATLANTIC RD.
N. PALM BEACH, FL 33408 US**FEI Number:** 59-1647703**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DONAGHY, MIKE MR.
143 YACHT CLUB DR.
#17
N. PALM BEACH, FL 33408 US**Name and Address of New Registered Agent:**ASSOCIATION MANAGEMENT OF THE PALM BEACHES
664 ATLANTIC RD.
N. PALM BEACH, FL 33408 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: MIKE DONAGHY

05/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: JONES, MEREDITH MR.
Address: 130 ATLANTIC RD.
City-St-Zip: N. PALM BEACH, FL 33408 USTitle: TD () Delete
Name: SMITH, JEAN MS.
Address: 143 YACHT CLUB DR, #2
City-St-Zip: N. PALM BEACH, FL 33408 USTitle: SD () Delete
Name: HARSHAW, DONNA MS.
Address: 143 YACHT CLUB DR., #5
City-St-Zip: N. PALM BEACH, FL 33408 USTitle: D () Delete
Name: DENISON, DORIS MS.
Address: 143 YACHT CLUB DR., #6
City-St-Zip: N. PALM BEACH, FL 33408 US**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MEREDITH JONES

PD

05/21/2006

Electronic Signature of Signing Officer or Director

Date