

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90014 029 \*\*\*\*61.45

<b>DOCUMENT # 727398</b> 1. Entity Name <b>HARBOUR ISLAND ASSOCIATION, INC.</b>					
Principal Place of Business <b>1238 HARBOUR ISLAND RD ORLANDO, FL 32809 US</b>			Mailing Address <b>1238 HARBOUR ISLAND RD ORLANDO, FL 32809 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01032006 Chg-NP CR2E037 (11/05) 4. FEI Number <b>NOT APPLICABLE</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SABIN; SEVIER 1208 WINDSONG RD ORLANDO, FL 32809</b>			Name <b>SCOTT FARIS</b> Street Address (P.O. Box Number is Not Acceptable) <b>1304 WINDSONG ROAD</b> City <b>ORLANDO</b> FL Zip Code <b>32809</b>		
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.			DATE <b>11/7/00</b> (NOTE: Registered Agent signature required when re-registering)		
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SABIN, SEVIER		NAME	SCOTT FARIS	
STREET ADDRESS	1208 WINDSONG RD		STREET ADDRESS	1304 WINDSONG ROAD	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP	ORLANDO, FL 32809	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SAULS, CLYDE		NAME	GILBERT CHAPIN	
STREET ADDRESS	1527 WINDSONG RD		STREET ADDRESS	1078 HARBOUR ISLAND ROAD	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP	ORLANDO, FL 32809	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCANLESS, CHARLES		NAME	SAULS, CLYDE	
STREET ADDRESS	1238 HARBOR ISLAND RD.		STREET ADDRESS	1527 Waterwitch Dr	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP	Orlando FL 32809	
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANTALEON, JOHN		NAME		
STREET ADDRESS	1336 WINDSONG RD		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 <b>1/17/06</b> DAYTIME PHONE # <b>407-587-6020</b>		