

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 30, 2010
Secretary of State

DOCUMENT# 730096

Entity Name: HARBORSIDE TERRACE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US**New Principal Place of Business:**C/O COMPASS GROUP MANAGEMENT
3701 N TAMIAMI TRAIL
NAPLES, FL 34103 US**Current Mailing Address:**C/O R & P PROPERTY MGMT
265 AIRPORT RD SOUTH
NAPLES, FL 34104 US**New Mailing Address:**C/O COMPASS GROUP MANAGEMENT
3701 N TAMIAMI TRAIL
NAPLES, FL 34103 US**FEI Number:** 59-1562855**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**R&P MANAGEMENT ASSOCIATES
265 AIRPORT ROAD SOUTH
NAPLES, FL 33942 US**Name and Address of New Registered Agent:**COMPASS GROUP MANAGEMENT
3701 N TAMIAMI TRAIL
NAPLES, FL 34103 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: COMPASS GROUP

04/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: LANNOM, GEORGE
Address: 4200 BELAIR LN #205
City-St-Zip: NAPLES, FL 34103

Title: PD
Name: KELLEY, FRANK
Address: 4200 BELAIR LN, #V-B
City-St-Zip: NAPLES, FL 34103

Title: TD
Name: TRIMMER, CAROLE
Address: 4200 BELAIR LN, #211
City-St-Zip: NAPLES, FL 34103

Title: D
Name: HSU, YOLANDE
Address: 4200 BELAIR LN #311
City-St-Zip: NAPLES, FL 34103

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.

SIGNATURE: COMPASS GROUP

MGR

04/30/2010

Electronic Signature of Signing Officer or Director

Date