

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Mar 18, 2011**  
**Secretary of State**

DOCUMENT# 734683

**Entity Name:** HARBOURSIDE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**ONE HARBOURSIDE DRIVE  
DELRAY BEACH, FL 33483**New Principal Place of Business:****Current Mailing Address:**ONE HARBOURSIDE DRIVE  
DELRAY BEACH, FL 33483**New Mailing Address:****FEI Number:** 59-1649130**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CAMPBELL III, DOAK S ESQ  
70 SE 4TH AVENUE  
DELRAY BEACH, FL 33483 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: D  
Name: KUBLIN, RICHARD  
Address: 1 HARBOURSIDE DR #1305  
City-St-Zip: DELRAY BEACH, FL 33483

Title: PD  
Name: STOKES, PAUL  
Address: 1 HARBOURSIDE DR #2511  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD  
Name: SAGER, GLORIA  
Address: 1 HARBOURSIDE DR #2712  
City-St-Zip: DELRAY BEACH, FL 33483

Title: TD  
Name: BOYCE, DEAN  
Address: 1 HARBOURSIDE DRIVE #1606  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP  
Name: CHAVOOR, RANDY  
Address: 1 HARBOURSIDE DR #3404  
City-St-Zip: DELRAY BEACH, FL 33483

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: PAUL STOKES

PRES

03/18/2011

Electronic Signature of Signing Officer or Director

Date