

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # 734865 1. Entity Name HARBOUR VILLAS CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 1035 DEL HARBOUR DR DELRAY BEACH FL 33483 US	Mailing Address 1035 DEL HARBOUR DELRAY BEACH FL 33483 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 65-0027375	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PASSLER, ROBERT 1042 DEL HARBOUR DR DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete PD PASSLER, ROBERT 1042 DEL HARBOUR DRIVE DELRAY BEACH FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete SD SMITH, SHEILA 1054 DEL HARBOUR DRIVE DELRAY BEACH FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete VD PETT, DOHERTY 1034 DEL HARBOUR DR. DELRAY BEACH FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete VD CORBETT, REG 1040 DEL HARBOUR DRIVE DELRAY BEACH FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete TD MCDERMOTT, EILEEN 1035 DEL HARBOUR DR. DELRAY BEACH FL 33483
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition U880000493186 04/19/06-80095-009 61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

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: *Robert F. Passler* 3/31/06 (56) 365-1617