

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740480

FILED
Apr 10, 2009
Secretary of State

Entity Name: HARBOUR HOUSE CONDOMINIUM AT OCEAN REEF, INC.

Current Principal Place of Business:

35 OCEAN REEF DR
#138
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

35 OCEAN REEF DR
#138
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 59-1900458 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CSI MANAGEMENT SERVICES
35 OCEAN REEF DR #138
KEY LARGO, FL 33037 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: VP () Delete
Name: ROASEAU, LAWRENCE
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

Title: P () Delete
Name: BETZ, MICHAEL
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

Title: S () Delete
Name: RUBINO, FRANK
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: FERNANDEZ, ANGEL
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

Title: T () Delete
Name: NEWMAN, STUART
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ROASEAU, LAWRENCE
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

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: T (X) Change () Addition
Name: PUGH, KEITH
Address: 35 OCEAN REEF DR #138
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information supplied with this filing does not qualify 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: TOM REMENTERIA

LCAM

04/10/2009

Electronic Signature of Signing Officer or Director

Date