

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

DOCUMENT# 741883

Entity Name: HARBOUR OAKS HOME OWNERS ASSN., INC.**Current Principal Place of Business:**1519 SKYLINE DRIVE
KISSIMMEE, FL 34744 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 421552
KISSIMMEE, FL 347421552 US**New Mailing Address:****FEI Number:** 59-1877818**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROMANOVSKY, JOAN
1519 SKYLINE DRIVE
KISSIMMEE, FL 34744 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: P
Name: WILCOCK, JAN
Address: 1456 SKYLINE DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: VP
Name: CELESTE, TAMMY
Address: 1464 SKYLINE DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: T
Name: ROMANOVSKY, JOAN
Address: 1519 SKYLINE DRIVE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: S
Name: KELLER, TERRY
Address: 1477 REGAL CT
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D
Name: YOCUM, JOHN
Address: 1471 REGAL CT
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D
Name: GALLAGHER, MIKE
Address: 1465 GRANDVIEW BLVD
City-St-Zip: KISSIMMEE, FL 34744 US

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: JAN WILCOCK

P

02/18/2011

Electronic Signature of Signing Officer or Director

Date