## K-PROFIT CORPORATION

## **FILED** Mar 10, 2008 8:00 am Secretary of State

03-10-2008 90074 030 \*\*\*\*61.25

## DOCUMENT #742293

HARBOUR SIDE CONDOMINIUM ASSOCIATION OF VERO BEACH, INC.



40042386

Principal Place of Business Mailing Address 835 20TH PL 835 20TH PL

VERO BEACH, FL 32960 US 1105 12TH ST. VERO BEACH, FL 32960 US						;	.	100,2				
2. Principal P	Place of Business	- No P.O. Box #	3. Mailing									
Suite, Apt. #, etc.										//_/		
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				01292008	Chg-NP	CR2E	037 (12/06)	<del></del>
City & Stat	e		City &	State				4, FEI Number 59-1988				plied For Applicable
Zip		Country	Zip		Cou	ntry			of Status Desire		\$8.75 Add	
	6. Name and	Address of Current F	legistered A	\gent				7. Name and	Address of Ne	w Registered	d Agent	
MERRILL.	KAREN					Name	ha	rles_	MCKi	nnor	<u> </u>	
_835					Street Address (P.O. Box Number is Not Acceptable)							
VERO BEA	ACH, FL 3296	OU				ý	754	5 Car	dinal	Dri	ve Ste	302
						City	IN	No no	ch	F	L 3290	Y03:
		mits this statement for	the purpose	of changing its	registere	ed office or	register	red agent, or both	th, in the State o	f Florida. I ai	m familiar with,	and accept
the obligati	ions of registered	agent.										;
. SIGNA <b>T</b> URE	CWY								2-	7001		
, SIGNATURE .	Signature, typed or prin	ted name of registered agent a	nd title if applica	ble. (NOT	E: Flegistere	d Agent aignatu	re required	d when reinstating)		DATE	,	- <del>, -</del>
	Filing Fee is	\$61.25		9. Election Car	npaign F		/ 4 ·	\$5.00 May E	Se :		ck payable to	
	Due by May			Trust Fund (	Contributi	ion.		Added to Fees		florida Dep	artment of St	ate
10.		OFFICERS AND DIF	ECTORS		11.			ADDITIONS/CH	ANGES TO OFF	ICERS AND		
TITLE	ST DAVIS IANE			☐ Delete	TITLE NAM		무.	n Ne	iding		☐ Change	Addition
NAME STREET ADDRESS	DAVI\$, JANE 1850 BAY RD #2E					ET ADDRESS 1825 Mooring Line Drive F						<del>!</del>
CITY-ST-ZIP	VERO BEACH				CITY	-ST-ZIP	Ven	Beac	h?FL	329	63	
TITLE	VP			☐ Delete	TITLE				, . –		Change	☐ Addition
NAME	HODGE, TED				NAM				•			
STREET ADDRESS	1850 BAY RD					ET ADDRESS						
CITY-ST-ZIP	VERO BEACH	I, FL 32963			_	-\$1-ZIP	77.6		<del></del>			
TITLE	D	UL BICUADO		Delete	THTLE NAM		PD	havanak	n. Rich	ard	hange	☐ Addition
NAME STREET ADDRESS	YARBOROUG   1815 MOORIN					ET ADDRESS	gar .	Moore	aLine	Drive	#2F	-
CITY-ST-ZIP	VERO BEACH					-S1-ZIP	Ver	borongh Moorr o Beac	K FL	329	963 <sup>(~</sup>	
TITLE	D			☐ Delete	TIΠL		D		:100-	•	Change	Addition
NAME	ARGUE, MAR	THA			NAM	E	Wen	idell Da	Mason.	O NiN	P # 1A	•
STREET ADDRESS		NGLINE DR #2C				ET ADDRESS	182	5 MOO		220	( )	
CITY-ST-ZIP	VERO BEACH	I, FL 32963			_	-ST-ZIP	ve	vo Beac	h, FL	30	05	
TITLE	D			☐ Detete	IITL	<u> ነ</u>					Change	☐ Addition
NAME LAFFERTY, COLLEEN STREET ADDRESS 1821 MOORINGLINE DE #2-G					NAM	IE EET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	VERO BEACH					-ST-ZIP						
TITLE	72.13 52 101	.,. = 1000		☐ Delete	TITL			<del>_</del>	<del></del>		Change	Addition
NAME					NAM	- 1						• •
STREET ADDRESS	1				STR	EET ADDRESS						
CITY-ST-ZIP					CITY	'-\$T-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE	UND TYPER OF PRINTED NAME OF SI	IGNING OFFICER OR DIRECTOR	Date /	Daytime Phone #
SIGNATURE:	end yan	- RICHARD JARBURGERCH	2/2/08	772-234