

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745713

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** HARBOURWOOD HOMEOWNERS ASSOCIATION OF HALLANDALE, INC.

**Current Principal Place of Business:**

533 LESLIE DRIVE  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

533 LESLIE DRIVE  
HALLANDALE, FL 33009 US

**New Mailing Address:**

FEI Number: 59-2014439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RENEE SMITH ESQ. P.A.  
1111 LINCOLN ROAD  
SUITE 400  
MIAMI BEACH, FL 33139 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: PD  
Name: GURTMAN, DAVID  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: VPD  
Name: FRIEDLANDER, STANLEY  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: TD  
Name: MACLEAN, SARAH  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: SD  
Name: KLOVE, NANCY  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: D  
Name: GAL, GEORGE  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

Title: D  
Name: SILVESTRI, GINA  
Address: 533 LESLIE DRIVE  
City-St-Zip: HALLANDALE, FL 33009

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: DAVID GURTMAN

P

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date