2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745713

FILED Mar 16, 2011 Secretary of State

Entity Name: HARBOURWOOD HOMEOWNERS ASSOCIATION OF HALLANDALE, INC.

Current Principal Place of Business: New Principal Place of Business:

533 LESLIE DRIVE

HALLANDALE, FL 33009 US

Current Mailing Address: New Mailing Address:

533 LESLIE DRIVE

HALLANDALE, FL 33009 US

FEI Number: 59-2014439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RENEE SMITH ESQ. P.A.

1111 LINCOLN ROAD

SUITE 400

SUITE 400

SUITE 400

MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US

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: SUSAN STEAKLEY 03/16/2011

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: LOTMAN, ALLEN
Address: 533 LESLIE DRIVE
City-St-Zip: HALLANDALE, FL 33009

Title: SD

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

Title: [

 Name:
 SCHATKEN, NANCY

 Address:
 533 LESLIE DRIVE

 City-St-Zip:
 HALLANDALE, FL 33009

Title: [

 Name:
 DADDARIO, VICTOR

 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 PD 03/16/2011