

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748394

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: HARBOUR POINTE OF DELRAY CONDOMINIUM, INC.

**Current Principal Place of Business:**

151 NW FIRST AVE  
DELRAY BEACH, FL 334835323

**New Principal Place of Business:**

**Current Mailing Address:**

151 NW FIRST AVE  
DELRAY BEACH, FL 334835323

**New Mailing Address:**

FEI Number: 65-0027562      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HASNER, PATTI  
151 NW FIRST AVE  
DELRAY BEACH, FL 33483      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: VPTD ( ) Delete  
Name: METZGER, CHRISTOPHER  
Address: 1734 DEL HAVEN DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPTD ( ) Delete  
Name: FORBES, JEFFRY  
Address: 1724 DEL HAVEN DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: PD ( ) Delete  
Name: GUTTUSO, JAMES  
Address: 1709 DEL HAVEN DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD ( ) Delete  
Name: DENAULT, DOROTHY  
Address: 1705 DEL HAVEN DR  
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: METZGER, CHRISTOPHER  
Address: 1734 DEL HAVEN DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DENAULT, DOROTHY  
Address: 1705 DEL HAVEN DR  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Change (X) Addition  
Name: STEIN, ALVIN  
Address: 1715 DEL HAVEN DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

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: PATTI HASNER

RA

03/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date