

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756802

FILED  
Mar 23, 2012  
Secretary of State

**Entity Name:** HARBOUR ISLAND CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5101 N. A1A, APT 310  
VERO BEACH, FL 32963

**New Principal Place of Business:**

333 17TH STREET  
SUITE 2L  
VERO BEACH, FL 32963

**Current Mailing Address:**

5101 N. A1A, APT 310  
VERO BEACH, FL 32963

**New Mailing Address:**

333 17TH STREET  
SUITE 2L  
VERO BEACH, FL 32963

**FEI Number:** 59-2349621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCKINNON, C. R.  
3355 OCEAN DR.  
VERO BEACH, FL 32963 US

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

AR CHOICE MANAGEMENT  
333 17TH STREET  
SUITE 2L  
VERO BEACH, FL 32960 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: TROY KELLY

03/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: ANDRASCIK, ANDREW  
Address: 5101 N. A1A, UNIT 108  
City-St-Zip: VERO BEACH, FL 32963

Title: D  
Name: CARAVELLA, DENIS A  
Address: 5101 N. A1A UNIT 109  
City-St-Zip: VERO BEACH, FL 32963

Title: P  
Name: PFAU, DANIEL  
Address: 5101 N. A1A UNIT 205  
City-St-Zip: VERO BCH., FL 32963

Title: S  
Name: GOWER, ELLEN  
Address: 5101 N. A1A UNIT 209  
City-St-Zip: VERO BEACH, FL 32963

Title: V  
Name: LARSEN, KURT VICE PR  
Address: 5101 N A1A UNIT 201  
City-St-Zip: VERO BEACH, FL 32963

Title: D  
Name: ARTHUR, SARA BOARD M  
Address: 5101 N A1A UNIT 302  
City-St-Zip: VERO BEACH, FL 32963

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: TROY KELLY

MGR

03/23/2012

Electronic Signature of Signing Officer or Director

Date