

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2009  
Secretary of State**

DOCUMENT# 761330

Entity Name: HARBOUR VILLA TOWNHOUSE ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 372033  
SATELLITE BEACH, FL 32937

**New Principal Place of Business:**

160 KRISTI DRIVE  
INDIAN HARBOUR BEACH, FL 32937

**Current Mailing Address:**

P.O. BOX 372033  
SATELLITE BEACH, FL 32937

**New Mailing Address:**

FEI Number: 59-2159859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BECKER & POLIAKOFF, P.A.  
2500 MAITLAND CENTER PKWY.  
SUITE 209  
MAITLAND, FL 32751 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 ( ) Delete  
Name: LUDWIG, DONNA  
Address: 363 KRISTI DR  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: FINNEGAN, MICHAEL  
Address: 160 KRISTI DR  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: JAEGER, ANNE  
Address: 101 KRISTI DR  
City-St-Zip: SATELLITE BEACH, FL 32937

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

Title: D (X) Change ( ) Addition  
Name: LUDWIG, DONNA  
Address: 163 KRISTI DR  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: PD (X) Change ( ) Addition  
Name: FINNEGAN, MICHAEL  
Address: 160 KRISTI DR  
City-St-Zip: SATELLITE BEACH, FL 32937

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

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: KATHY RANDA

ACCT

01/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date