

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90121 012 ****61.25

DOCUMENT # 762083



1. Entity Name
HARBOUR GREEN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
**120 ANCHOR DR
KEY LARGO FL 33037
US**

Mailing Address
**120 ANCHOR DR
KEY LARGO FL 33037
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

4. FEI Number **59-2156631**
Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOSS, EVELYN
120 ANCHOR DRIVE
KEY LARGO FL 33037**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Delete
NAME	KAMFJORD, ERIK	
STREET ADDRESS	120 ANCHOR DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	PD	<input type="checkbox"/> Delete
NAME	FOSTER, MICHAEL	
STREET ADDRESS	120 ANCHOR DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	D	<input type="checkbox"/> Delete
NAME	PINSOF, STEWART	
STREET ADDRESS	120 ANCHOR DRIVE	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PHILLIPS, CALVIN	
STREET ADDRESS	120 ANCHOR DR	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	PDA	<input type="checkbox"/> Delete
NAME	MOSS, EVELYN	
STREET ADDRESS	120 ANCHOR DR	
CITY-ST-ZIP	KEY LARGO FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BRUNO, JOESPH	
STREET ADDRESS	120 ANCHOR DR	
CITY-ST-ZIP	KEY LARGO FL 33037	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Friedman, Edwina	
STREET ADDRESS	120 Anchor Drive	
CITY-ST-ZIP	Key Largo, FL 33037	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Evelyn Moss* Managing Agent 4-28-03 305-367-3232

CR2E037 (10/02)