

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006722

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** COMMODORE ESTATES AT HARBOR ISLANDS ASSOCIATION, INC.

**Current Principal Place of Business:**

980 HARBOR ISLANDS  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

980 HARBOR ISLANDS DRIVE  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

980 HARBOR ISLANDS  
HOLLYWOOD, FL 33019

**New Mailing Address:**

980 HARBOR ISLANDS DRIVE  
HOLLYWOOD, FL 33019

**FEI Number:** 90-0265259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER & POLIAKOFF, P.A.  
ATTN: DAVID ROGEL, ESQ  
121 ALHAMBRA PLAZA SUITE 100  
MIAMI, FL 33134 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: P ( ) Delete  
Name: GUTKIN, KEVIN  
Address: 980 HARBOR ISLANDS DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP ( ) Delete  
Name: COHEN, DEAN  
Address: 980 HARBOR ISLAND DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: ST ( ) Delete  
Name: LANCE, ELLMAN  
Address: 980 HARBOR ISLAND DR  
City-St-Zip: HOLLYWOOD, FL 33019

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

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

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

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: KEVIN GUTKIN

P

01/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date