2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005103

FILED Apr 14, 2009 Secretary of State

Entity Name: HARBOUR WALK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

 1104 SE 46TH LANE #2
 5210 CHIQUITA BLVD

 CAPE CORAL, FL 33904
 CAPE CORAL, FL 33914

Current Mailing Address: New Mailing Address:

1104 SE 46TH LANE #2
CAPE CORAL, FL 33904

ROSSMAN REALTY PROPERTY MGMT, LLC
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904

FEI Number: 56-2321795 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSSMAN, MICHELLE CAM
ROSSMAN PROPERTY MGMT, LLC
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904 US

ROSSMAN, MICHELLE CAM
ROSSMAN REALTY PROPERTY MGMT, LLC
1104 SE 46TH LANE #2
CAPE CORAL, FL 33904 US

CAPE CORAL, FL 33904 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: MICHELLE ROSSMAN, CAM 04/14/2009

Electronic Signature of Registered Agent Date

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

Fitle: VD () Delete Title: VD (X) Change () Addition

 Name:
 GUZIAK, ROBERT
 Name:
 GUZIAK, ROBERT

 Address:
 34301 HILL DR
 Address:
 34301 HILL DR

 City-St-Zip:
 KIMBALL, MI 48074
 City-St-Zip:
 NEW BALTIMORE, MI 48047

Title: PD () Delete Title: PD (X) Change () Addition Name: GENT, WENDY Name: GENT, WENDY

 Address:
 5210 CAIQUITA BLVD #201 A
 Address:
 5210 CAIQUITA BLVD #201A

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 CAPE CORAL, FL 33914

Title: STD () Delete Title: STD (X) Change () Addition

Name: DOVE, MARY Name: DOVE, MARY

 Address:
 5218 CHIQUITA BLVD, #202C
 Address:
 5218 CHIQUITA BLVD, #202C

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:
 CAPE CORAL, FL 33914

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: MICHELLE ROSSMAN, CAM CAM 04/14/2009