


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90047 042 ****70.00

DOCUMENT # N02000007304					
1. Entity Name HARBOR VIEW DAYTONA CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 145 N. HALIFAX AVE DAYTONA BEACH, FL 32118		Mailing Address 1326 S RIDGEWOOD AVE 14 DAYTONA BEACH, FL 32114			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 73-1657710	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CLIFTEN, RONALD D JR 1326 S RIDGEWOOD AVE 14 DAYTONA BEACH, FL 32114			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SHORE, STANLEY		NAME	Flaherty, Judith	
STREET ADDRESS	145 N. HALIFAX AVE #304		STREET ADDRESS	145 N. HALIFAX AVE #608	
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		CITY-ST-ZIP	Daytona Beach FL 32118	
TITLE	V	<input type="checkbox"/> Delete	TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FLAHERTY, JUDITH		NAME	FRANCALANCIA, ANTHONY	
STREET ADDRESS	145 N. HALIFAX AVE #608		STREET ADDRESS	145 N. HALIFAX AVE # 507	
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		CITY-ST-ZIP		
TITLE	DT	<input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DUPREE, SALLY		NAME	Shore, Stanley	
STREET ADDRESS	145 N HALIFAX AVE #408		STREET ADDRESS	145 N. HALIFAX AVE # 304	
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		CITY-ST-ZIP	Daytona Beach FL 32118	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRASER, FRANK		NAME		
STREET ADDRESS	11394 REED ISLAND DR		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32225		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WARDEN, FAYE		NAME		
STREET ADDRESS	145 N HALIFAX AVE #605		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINEBRENNER, JAMES		NAME		
STREET ADDRESS	145 N. HALIFAX AVE #106		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH, FL 32118		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____			Date 4/2/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		