

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 02, 2005
Secretary of State

DOCUMENT# N04000005785

Entity Name: THE INN AT HARBOURSIDE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**611 DESTINY DRIVE
BAHIA BEACH, FL 33570**New Principal Place of Business:****Current Mailing Address:**12800 UNIVERSITY DRIVE., STE 400
FORT MYERS, FL 33907**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORDELLO, DOUGLAS J
12800 UNIVERSITY DRIVE., STE 400
FORT MYERS, FL 33907 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: D () Delete
Name: POCKRUS, ALEXANDER L
Address: 12800 UNIVERSITY DRIVE., STE 400
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: WARD, SHAWN
Address: 12800 UNIVERSITY DRIVE., STE 400
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: NEWHART, ROBERT
Address: 611 DESTINY DRIVE
City-St-Zip: BAHIA BEACH, FL 33570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: POCKRUS, ALEXANDER L
Address: 12800 UNIVERSITY DRIVE., STE 400
City-St-Zip: FORT MYERS, FL 33907

Title: DVS (X) Change () Addition
Name: CORDELLO, DOUGLAS
Address: 12800 UNIVERSITY DRIVE., STE 400
City-St-Zip: FORT MYERS, FL 33907

Title: DVT (X) Change () Addition
Name: NEWHART, ROBERT
Address: 611 DESTINY DRIVE
City-St-Zip: BAHIA BEACH, FL 33570

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEXANDER L. POCKRUS

DP

06/02/2005

Electronic Signature of Signing Officer or Director_____
Date