

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009374

FILED
Apr 13, 2006
Secretary of State

Entity Name: HARBOR VISTA TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1500 NORTH FEDERAL HWY STE 200
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

790 EAST BROWARD BLVD.
SUITE 201B
FORT LAUDERDALE, FL 33301

Current Mailing Address:

1500 NORTH FEDERAL HWY STE 200
FORT LAUDERDALE, FL 33304

New Mailing Address:

790 EAST BROWARD BLVD.
SUITE 201B
FORT LAUDERDALE, FL 33301

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MASTRIANA & CHRISTIANSEN, P.A.
1500 NORTH FEDERAL HWY STE 200
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

DWORS, ROBERT F
1029 SE 2ND COURT
FORT LAUDERDALE, FL 33301 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: ROBERT F. DWORS

04/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAULKNER, DOUGLAS
Address: 1500 NORTH FEDERAL HWY STE 200
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S () Delete
Name: O'MALLEY, DANIEL D
Address: 1500 NORTH FEDERAL HWY STE 200
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VP () Delete
Name: DWORS, ROBERT
Address: 1500 NORTH FEDERAL HWY STE 200
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FAULKNER, DOUGLAS
Address: 790 EAST BROWARD BLVD. SUITE 201
City-St-Zip: FORT LAUDERDALE, FL 33301

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

Title: VP (X) Change () Addition
Name: DWORS, ROBERT
Address: 790 EAST BROWARD BLVD. SUITE 201B
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT F. DWORS

VP

04/13/2006

Electronic Signature of Signing Officer or Director

Date