

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 11, 2012
Secretary of State

DOCUMENT# N05000004946

Entity Name: HARBOR CREST ASSOCIATION, INC.**Current Principal Place of Business:**2 OCTAVIA WAY
SAFETY HARBOR, FL 34695**New Principal Place of Business:**250 DR ML KING JR ST N
SAFETY HARBOR, FL 34695**Current Mailing Address:**P.O. BOX 1073
SAFETY HARBOR, FL 34695**New Mailing Address:**250 DR ML KING JR ST N
SAFETY HARBOR, FL 34695**FEI Number:** 51-0647393**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**FERRIS, WILLIAM E JR
2 OCTAVIA WAY
SAFETY HARBOR, FL 34695 US**Name and Address of New Registered Agent:**CLARK, KEITH J
250 DR ML KING JR ST N
SAFETY HARBOR, FL 34695 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: KEITH J CLARK

10/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: CLARK, KEITH J
Address: 250 DR ML KING JR ST N
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DVP
Name: MIKE, MCDONALD
Address: 270 DR ML KING JR ST N
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DS
Name: CHIARELLI, MEREDITH
Address: 240 DR ML KING JR ST N
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DT
Name: GRINLEY, NOELLE
Address: 250 DR ML KING JR ST N
City-St-Zip: SAFETY HARBOR, FL 34695

I hereby 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 all other like empowered.

SIGNATURE: KEITH J CLARK

DP

10/11/2012

Electronic Signature of Signing Officer or Director

Date