

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005097

FILED
Apr 17, 2006
Secretary of State

Entity Name: HARBORVIEW GRANDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

530 S. GULFVIEW BLVD.
CLEARWATER, FL 33767

New Principal Place of Business:

Current Mailing Address:

530 S. GULFVIEW BLVD.
CLEARWATER, FL 33767

New Mailing Address:

C/O S/3 CONSULTING GROUP, LLC
19534 GULF BLVD #202
INDIAN SHORES, FL 33785

FEI Number: 20-2847753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARSENAULT, KENNETH G JR.
10225 ULMERTON RD., SUITE 2
LARGO, FL 33771 US

Name and Address of New Registered Agent:

SMITH, WILLIAM F
19534 GULF BLVD
202
INDIAN SHORES, FL 33785 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: WILLIAM F. SMITH

04/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAGOSTINO, FRANK
Address: 2840 W. BAY DR., #135
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD () Delete
Name: LYONS, ROBERT E
Address: 2840 W. BAY DR., #135
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: STD () Delete
Name: SIMON, JODY
Address: 2840 W. BAY DR., #135
City-St-Zip: BELLEAIR BLUFFS, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 LYONS

VD

04/17/2006

Electronic Signature of Signing Officer or Director

Date