

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006095

FILED  
Mar 18, 2008  
Secretary of State

Entity Name: HARBOUR GLEN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2287 W EAU GALLIE BLVD  
SUITE A  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

2287 W EAU GALLIE BLVD  
SUITE A  
MELBOURNE, FL 32935

**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:**

LARKIN, DAVID G  
1900 SOUTH HICKORY STREET SUITE A  
MELBOURNE, FL 32901    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:                      PS                      ( ) Delete  
Name:                      WILLIAMS, MICHAEL H  
Address:                      2287 W EAU GALLIE BLVD STE A  
City-St-Zip:                      MELBOURNE, FL 32935

Title:                      VT                      ( ) Delete  
Name:                      DREYER, MICHAEL  
Address:                      2287 W EAU GALLIE BLVD STE A  
City-St-Zip:                      MELBOURNE, FL 32935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: MICHAEL H WILLIAMS

PS

03/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date