

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006982

FILED
Feb 20, 2009
Secretary of State

Entity Name: HARBOR SHORES HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12313 PINE ISLAND DR
LEESBURG, FL 34788

New Principal Place of Business:

12813 PINE ISLAND DR
LEESBURG, FL 34788

Current Mailing Address:

P O BOX 350144
GRAND ISLAND, FL 32735

New Mailing Address:

FEI Number: 59-2348485

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: BARBIC, JACK
Address: 35642 EXPRESS CT
City-St-Zip: LEESBURG, FL 34788

Title: VP () Delete
Name: TEEGARDIN, JACK R
Address: 12313 PINE ISLAND DR
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: WOMBLE, SHARON
Address: 12747 PINE ISLAND DR
City-St-Zip: LEESBURG, FL 34788

Title: T () Delete
Name: HOWARD, RON
Address: 12313 PINE ISLAND DR
City-St-Zip: LEESBURG, FL 34788

Title: S () Delete
Name: HAYNES, DONNA
Address: 35615 QUAIL RUN
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: BEARY, TIMOTHY J
Address: 12313 PINE ISLAND DR
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARBIC, JACK
Address: 35642 CYPRESS CT
City-St-Zip: LEESBURG, FL 34788

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

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

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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 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: RON HOWARD

TREA

02/20/2009

Electronic Signature of Signing Officer or Director

Date