

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006069

FILED
Apr 13, 2009
Secretary of State

Entity Name: HARBORAGE YACHT FIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1515 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1515 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 26-0538046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BCRA, LLC
7777 GLADES RD
STE 300
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

RAPHAEL, LINDSAY E
110 SE 6TH STREET
15TH FLOOR
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: LINDSAY E RAPHAEL

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOODFELLOW, JOHN
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: DV () Delete
Name: RUSH, ROBERT
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: DST () Delete
Name: FRANCIS, BRUCE
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOODFELLOW, JOHN
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: VPD (X) Change () Addition
Name: REILLY, LISA
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: STD (X) Change () Addition
Name: FREY, SUSAN
Address: 1515 SOUTH FEDERAL HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

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: JOHN GOODFELLOW

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date