

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08228

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** HARMONY TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1200 NW 80TH AVE.  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ROYAL PROPERTY MANAGEMENT  
8517 W ATLANTIC BLVD  
CORAL SPRINGS, FL 33071 US

**New Mailing Address:**

**FEI Number:** 59-2639200

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROYAL PROPERTY MANAGEMENT, INC.  
8317 W ATLANTIC BLVD.  
CORAL SPRINGS, FL 33071 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: P  
Name: MOREHOUSE, JIM  
Address: 1200 NW 80 AVE., #306  
City-St-Zip: MARGATE, FL 33063 US

Title: T  
Name: MONTERO, YESKLYN  
Address: 1200 NW 80 AVE #101  
City-St-Zip: MARGATE, FL 33063 US

Title: D  
Name: OROSZ, ELIZABETH  
Address: 1200 NW 88TH AVE #206  
City-St-Zip: MARGATE, FL 33063 US

Title: S  
Name: MAHONEY, M.  
Address: 1200 NW 80TH AVE.  
City-St-Zip: MARGATE, FL 33063 US

Title: VP  
Name: SIVITER, KENNETH  
Address: 1200 NW80TH AVE # 201  
City-St-Zip: MARGATE, FL 33063 US

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: JAMES MOREHOUSE

PD

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date