

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08581

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** HARBOR OAKS OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2763 HIGHWAY 434, W.  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

2767 W. STATE ROAD 434  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 59-2536700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASSEY, GARY E.  
112 WEST CITRUS STREET  
ALTAMONTE SPRINGS, FL 327142577 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: PD  
Name: WARESAS, JOSEPH J.  
Address: 2771 HIGHWAY 434, W.  
City-St-Zip: LONGWOOD, FL 32779

Title: TD  
Name: ABRASSART, THOMAS  
Address: 2763 HWY 434 W  
City-St-Zip: LONGWOOD, FL 32779

Title: SD  
Name: WOODS, LARRY  
Address: 2767 HWY 434 W  
City-St-Zip: LONGWOOD, FL 32779

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: LAWRENCE L. WOODS

SD

03/03/2011

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

\_\_\_\_\_  
Date