


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 15, 2005 8:00 am**  
**Secretary of State**

04-15-2005 90073 008 \*\*\*\*61.25

<b>DOCUMENT # N17922</b>							
1. Entity Name HARRINGTON LAKE CONDOMINIUM ASSOCIATION, INC.							
Principal Place of Business 899 WOODBRIDGE DR. VENICE, FL 34293			Mailing Address 899 WOODBRIDGE DR. VENICE, FL 34293				
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	04062005 Chg-NP CR2E037 (10/03)			
4. FEI Number 59-2775898				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
ADVANCED MANAGEMENT, INC 899 WOODBRIDGE DR VENICE, FL 34293			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____							
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees			
Make check payable to Florida Department of State							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	COOK, ROBERT		NAME	Ted Schable			
STREET ADDRESS	899 WOODBRIDGE DR.		STREET ADDRESS	899 Woodbridge Dr.			
CITY-ST-ZIP	VENICE, FL 34293		CITY-ST-ZIP	Venice FL 34293			
TITLE	TD	<input type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	SCHABLE, TED		NAME	Carolyn godhaus			
STREET ADDRESS	778 HARRINGTON LAKE DR N		STREET ADDRESS	899 woodbridge Dr.			
CITY-ST-ZIP	VENICE, FL 34293		CITY-ST-ZIP	Venice FL 34293			
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	NEAL, JAMES B		NAME	Robert Curtis			
STREET ADDRESS	899 WOODBRIDGE DRIVE		STREET ADDRESS	899 woodbridge Dr.			
CITY-ST-ZIP	VENICE, FL 34293		CITY-ST-ZIP	Venice FL 34293			
TITLE	SD	<input type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BOKELMAN, HERMAN		NAME	Ted DeVirgillis			
STREET ADDRESS	899 WOODBRIDGE DR.		STREET ADDRESS	899 woodbridge dr.			
CITY-ST-ZIP	VENICE, FL 34293		CITY-ST-ZIP	Venice FL 34293			
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <u>T. P. DeVirgillis</u>			TED DeVIRGILLIS Treasurer 4.13.05 941-493-0287				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #				