2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 20, 2006 8:00 am Secretary of State **DOCUMENT # N17922** 1. Entity Name 03-20-2006 90009 025 ****61.25 HARRINGTON LAKE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 899 WOODBRIDGE DR. 899 WOODBRIDGE DR. VENICE, FL 34293 VENICE, FL 34293 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03072006 CR2E037 (11/05) 4. FEI Number 59-2775898 Applied For City & State City & State Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ADVANCED MANAGEMENT, INC Street Address (P.O. Box Number is Not Acceptable) 899 WOODBRIDGE DR VENICE, FL 34293 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 reinstating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD Change ☐ Addition TIT1 F Delete Delete TITLE SCHABLE, TED NAME NAME STREET ADDRESS 899 WOODBRIDGE DR STREET ADDRESS VENICE, FL 34293 CITY-ST-ZIP CITY-ST-ZIP Change VPD ☐ Delete TITLE Addition TITLE HERMAN BOKELMAN 899 WOODBRIDGE DR NAME GRODHAUS, CAROLYN NAME STREET ADDRESS 899 WOODBRIDGE DRIVE STREET ADDRESS VENCE FL CITY-ST-7IP VENICE, FL 34293 CITY-ST-ZIP Delete Addition TITLE Change Change TITLE LESLIE RUNESTAD **BOKELMAN, HERMAN** NAME NAME 899 WOODBRIDGE DR. STREET ADDRESS 899 WOODBRIDGE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VENICE, FL 34293 ☐ Change Addition TITLE □ Delete TITLE CURTIS, ROBERT NAME 899 WOODBRIDGE DR. STREET ADDRESS STREET ADDRESS VENICE, FL 34293 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE DEVIRGILIS, TED NAME NAME 899 WOODBRIDGE DR. STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP VENICE, FL 34293 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME

12. I hereby certify that the information supplied with this illing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.7.06

941.443.0287

Daytime Phone #

FILED