

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31039

FILED
Apr 12, 2010
Secretary of State

Entity Name: HARBOUR LIGHTS SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O JOAN O'CONNOR
541 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

New Principal Place of Business:

C/O ROCHELLE CURVIN
500 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

Current Mailing Address:

C/O JOAN O'CONNOR
541 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

New Mailing Address:

C/O ROCHELLE CURVIN
500 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

FEI Number: 60-0116050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, JOAN
541 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

CURVIN, ROCHELLE
500 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174 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: ROCHELLE CURV

04/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PADGETT, MICHELLE
Address: 501 HARBOUR LIGHTS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: STD
Name: CURVIN, ROCHELLE
Address: 500 HARBOUR LIGHTS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: THOMAS HOOD
Address: 530 HARBOUR LIGHTS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

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: ROCHELLE CURVIN

STD

04/12/2010

Electronic Signature of Signing Officer or Director

Date