## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N31551

FILED Mar 31, 2010 Secretary of State

Entity Name: CORAL POINTE AT HARBOURSIDE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR #260 CLEARWATER, FL 33762 US

Current Mailing Address: New Mailing Address:

5001 FOURTH STREET NORTH CONDOMINIUM ASSOCIATES
SUITE A 3001 EXECUTIVE DR #260
ST. PETERSBURG, FL 33734 US CLEARWATER, FL 33762 US

FEI Number: 59-2953582 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LANG & BROWN PA 5001 FOURTH STREET NORTH SUITE A ST. PETERSBURG, FL 33734 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: TD

Name: BLAVNE, GERALD

Address: 3001 EXECUTIVE DRIVE, SUITE 260

City-St-Zip: CLEARWATER, FL 33762

Title: VD

Name: OLESON, RAY

Address: 3001 EXECUTIVE DRIVE, SUITE 260

City-St-Zip: CLEARWATER, FL 33762

Title: PD

Name: FIGIEL, LEN

Address: 3001 EXECUTIVE DRIVE, SUITE 260

City-St-Zip: CLEARWATER, FL 33762

Title: SD

Name: O'KEEFE, SHERRI

Address: 3001 EXECUTIVE DRIVE, SUITE 260

City-St-Zip: CLEARWATER, FL 33762

Title:

Name: OLSON, BRUCE

Address: 3001 EXECUTIVE DRIVE, SUITE 260

City-St-Zip: CLEARWATER, FL 33762

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: LEN FIGIEL P 03/31/2010