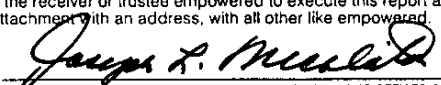


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90056 015 ****61.25

DOCUMENT # N33686 1. Entity Name QUEENS HARBOUR OWNERS ASSOCIATION, INC.					
Principal Place of Business 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 32779-5044 US			Mailing Address 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 32779-5044 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0236769 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HART, JAMES W JR. SENTRY MANAGEMENT, INC. 2180 W. SR 434, STE 5000 LONGWOOD, FL 32779			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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee Is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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 ☒ Delete		TITLE	PD ☐ Change ☒ Addition	
NAME	RAPOWITZ, BERT		NAME	NICOLATO, JOSEPH	
STREET ADDRESS	43 OLD SETTLERS DR		STREET ADDRESS	3611 FAIR OAKS PL	
CITY-ST-ZIP	PITTSFORD, NY 14534		CITY-ST-ZIP	LONGBOAT KEY, FL 34228	
TITLE	VPD ☐ Delete		TITLE	D ☐ Change ☒ Addition	
NAME	HELLER, MARTIN		NAME	LANDAU, LENNY	
STREET ADDRESS	3562 FAIROAKS LANE		STREET ADDRESS	3518 FAIR OAKS LN	
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP	LONGBOAT KEY, FL 34228	
TITLE	SD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	RAPOWITZ, BERT		NAME		
STREET ADDRESS	3617 FAIR OAKS PL		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
TITLE	TD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	MANASSE, RONDA		NAME		
STREET ADDRESS	3537 FAIR OAKS LN		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BALDWIN, ROBERT		NAME		
STREET ADDRESS	3606 FAIR OAKS PLACE		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
TITLE	D ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	SAMET, NORMAN		NAME		
STREET ADDRESS	3584 FAIR OAKS PL		STREET ADDRESS		
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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.					
SIGNATURE: 			4/2/08 Date		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Daytime Phone #					