

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 15, 2009**  
**Secretary of State**

DOCUMENT# N35969

**Entity Name:** HARBORDALE NEIGHBORHOOD ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

P.O. BOX 743  
SAINT PETERSBURG, FL 33731 US

**New Principal Place of Business:**

621-25 AVENUE SOUTH  
SAINT PETERSBURG, FL 33705 US

**Current Mailing Address:**

P.O. BOX 743  
SAINT PETERSBURG, FL 33731 US

**New Mailing Address:**

**FEI Number:** 59-2992384      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MCEACHERN, THERESA  
621 - 25TH AVENUE SOUTH  
ST. PETERSBURG, FL 33705 US

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

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:**

Title: P ( ) Delete  
Name: MCEACHERN, THERESA  
Address: 621 25 AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: VP ( ) Delete  
Name: GAUSMAN, GAYLE A  
Address: 547 29 AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: S ( ) Delete  
Name: SMITH, MARINE  
Address: 746 26TH AVE SO  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: MCEACHERN, DAVID  
Address: 621 25 AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: T ( ) Delete  
Name: MITCHELL, MARY  
Address: 832 28 AVENUE SO  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D ( ) Delete  
Name: BERTHELOT, RICHARD  
Address: 2201 DR. M.L. KING STREET SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SCOTT, DURFEE  
Address: 215-22 AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33705

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: THERESA MCEACHERN

PRES

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date