

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46656

FILED  
Apr 05, 2012  
Secretary of State

**Entity Name:** HARBOUR ISLAND MARINA ASSOCIATION, INC.

**Current Principal Place of Business:**

610 W. AZEELE STREET  
SUITE 206  
TAMPA, FL 33606 US

**New Principal Place of Business:**

610 W. AZEELE STREET  
SUITE 101  
TAMPA, FL 33606 US

**Current Mailing Address:**

PO BOX 173181  
TAMPA, FL 33672 US

**New Mailing Address:**

**FEI Number:** 59-3098939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEW PORT PROPERTY MANAGEMENT  
610 W. AZEELE STREET, SUITE 206  
TAMPA, FL 33606 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  
Name: FITZGIBBONS, JOHN  
Address: 911 MOORING CIR  
City-St-Zip: TAMPA, FL 33602

Title: D  
Name: DANCE, TIM  
Address: 916 ANCHORAGE ROAD  
City-St-Zip: TAMPA, FL 33602

Title: T  
Name: ESTEP, SANDRA  
Address: 847 SEDDON COVE WAY  
City-St-Zip: TAMPA, FL 33602

Title: D  
Name: KEARNEY, BING  
Address: 911 SEDDON COVE WAY  
City-St-Zip: TAMPA, FL 33602

Title: VP  
Name: BURNS, STEVE  
Address: 917 HARBOUR BAY DR  
City-St-Zip: TAMPA, FL 33602

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: JOHN FITZGIBBONS

P

04/05/2012

Electronic Signature of Signing Officer or Director

Date