2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002161

FILED Apr 19, 2005 Secretary of State

Entity Name: HARBOUR CLUB A/B OWNERS ASSOCIATION, INC.

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

100 BLUFF VIEW DRIVE 100 BLUFF VIEW DRIVE

APT 302-B APT 212A

BELLEAIR BLUFFS, FL 34640 US BELLEAIR BLUFFS, FL 33770 US

Current Mailing Address: New Mailing Address:

100 BLUFF VIEW DR. 100 BLUFF VIEW DR.

APT. 212 A
LARGO, FL 33770 US

APT. 212 A
BELLEAIR BLUFFS, FL 33770 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

ZACUR, RICHARD A

5200 CENTRAL AVENUE

ZACUR, RICHARD A

5200 CENTRAL AVENUE

ST. PETERSBURG, FL US ST. PETERSBURG, FL 33733 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: CLARIS HILLIER 04/19/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

Name: VANDERMADE, MURIEL
Address: 100 BLUFFVIEW DRIVE, #302B
Address: 100 BLUFFVIEW DRIVE, #302B
Other Strain Belliers of 23770

City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: ST () Delete Title: ST (X) Change () Addition Name: HILLIER, CLARIS ST (X) Change () Addition

Address: 100 BLUFFVIEW DR., #212A Address: 100 BLUFFVIEW DR., #212A City-St-Zip: BEELLEAIR BLUFFS, FL 33770

Title: D () Delete Title: D (X) Change () Addition Name: BERCOWITZ, WILLIAM Name: BURDICK, DORIS

 Name:
 BERCOWITZ, WILLIAM
 Name:
 BURDICK, DORIS

 Address:
 100 BLUFFVIEW DRIVE, 401A
 Address:
 100 BLUFF VIEW DR. 210A

 City-St-Zip:
 BELLEAIR BLUFFS, FL
 City-St-Zip:
 BELLEAIR BLUFFS, FL 33770

Title: D () Delete Title: () Change () Addition

 Name:
 JOSEPH DADDIO,
 Name:

 Address:
 100 BLUFF VIEW DRIVE, APT. 303-B
 Address:

 City-St-Zip:
 BELLEAIR BLUFFS, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLARIS HILLIER SEC 04/19/2005