2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002886

FILED Apr 29, 2006 Secretary of State

Entity Name: GRAND HARBOUR AT HARBOUR POINT OWNERS ASSOCIATION, INC.

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

215 GRAND BLVD. SUITE 200

MIRAMAR BEACH, FL 32550 US

New Mailing Address: Current Mailing Address:

215 GRAND BLVD. SUITE 200

MIRAMAR BEACH, FL 32550 US

FEI Number: 59-3217268 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:

GORMLEY, TERRY P 215 GRAND BLVD. SUITE 200

MIRAMAR BEACH, FL 32550 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BAKER, DEBBIE BAKER, DEBBIE Name: Name: PO BOX 53471 Address: PO BOX 53471 Address:

City-St-Zip: KNOXVILLE, TN 37950 US City-St-Zip: KNOXVILLE, TN 37950 US

Title: () Delete Title: DST (X) Change () Addition SULLIVAN, NOEL Name: SULLIVAN, NOEL Name: Address: 4341 CHICKERING LN Address: 4341 CHICKERING LN City-St-Zip: NASHVILLE, TN 37215 US City-St-Zip: NASHVILLE, TN 37215 US

Title: DP () Delete Title: DP (X) Change () Addition REDDING, PATRICIA BOHM, WERNER Name: Name:

320 KEARNEY AVE #4 Address: PO BOX 1238 Address: City-St-Zip: HAMPTON, NH 038431238 US City-St-Zip: SANTE FE, NM 87501 US

(X) Change () Addition Title: DS () Delete Title: DV SEACREST, CONNIE Name: Name: GANGER, JOANNE

7390 WILDERCLIFF DR. NW Address: Address: 1823 IDLEWILD BEACH DR City-St-Zip: LOUISVILLE, KY 40205 US City-St-Zip: RICHLAND, MI 49083 US

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

HERRINGTON, LEE BAKER, DEBBIE Name: Name: 1555 WESTCHESTER DR PO BOX 53471 Address: Address:

KNOXVILLE, TN 37950 US City-St-Zip: BATON ROUGE, LA 70810 US City-St-Zip:

Title: () Delete Title: () Change (X) Addition REDDING, PATRICIA Name: Name:

Address: Address: PO BOX 1238 HAMPTON, NH 038431238 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: NOEL SULLIVAN DST 04/29/2006

Electronic Signature of Signing Officer or Director

Date