

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001412

FILED
Jan 29, 2007
Secretary of State

Entity Name: HARBOURTOWNE AT COUNTRY WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1697 NANTUCKET CT
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

1697 NANTUCKET COURT
PALM HARBOR, FL 34683 US

New Mailing Address:

FEI Number: 65-0530802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEZER, STEVEN H P.A.
1212 COURT STREET
SUITE B
CLEARWATER, FL 33756 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: PD () Delete
Name: GRUTCHFIELD, SCOTT
Address: 2918 HILLCREEK CIRCLE SOUTH
City-St-Zip: CLEARWATER, FL 33759 US

Title: SD () Delete
Name: MCNAMARA, CHRISTOPHER
Address: 1697 NANTUCKET CT
City-St-Zip: PALM HARBOR, FL 34683 US

Title: TD () Delete
Name: LAZZARA, ANTHONY
Address: 4525 REDWOOD DRIVE
City-St-Zip: NORRIDGE, IL 60706 US

Title: D () Delete
Name: ALLEN, MARC
Address: P O BOX 523
City-St-Zip: PALM HARBOR, FL 34682 US

Title: D () Delete
Name: BAHNG, DANNY
Address: 760 BARNUM WAY
City-St-Zip: MONTEREY PARK, CA 91754 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: LAZZARA, ANTHONY
Address: 4525 REDWOOD DRIVE
City-St-Zip: NORRIDGE, IL 60706 US

Title: D (X) Change () Addition
Name: LUZZO, MICHAEL
Address: 42 BARNES STREET
City-St-Zip: LONG BEACH, NY 11561 US

Title: D (X) Change () Addition
Name: TIMPANELLI, PAUL
Address: 1652 NANTUCKET COURT
City-St-Zip: PALM HARBOR, FL 34683 US

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: CHRISTOPHER MCNAMARA

SD

01/29/2007

Electronic Signature of Signing Officer or Director

Date