2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002874

FILED Mar 23, 2011 Secretary of State

Entity Name: HARBOUR GREENS @ LACUNA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O DAVENPORT PROF. PROP. MGMT. INC. 6620 LAKE WORTH ROAD STE E

3082 JOG ROAD

LAKE WORTH, FL 33467

LAKE WORTH, FL 33467 US

Current Mailing Address:

New Mailing Address:

C/O DAVENPORT PROF. PROP. MGMT. INC.

C/O PHOENIX MANAGEMENT SERVICES.

C/O PHOENIX MANAGEMENT SERVICES.

6620 LAKE WORTH ROAD STE E LAKE WORTH, FL 33467

3082 JOG ROAD LAKE WORTH, FL 33467

US

FEI Number: 65-0653660

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROSENTHAL, DAVID % PHOENIX MANAGEMENT, INC. PHOENIX MANAGEMENT SERVICES, INC % PHOENIX MANAGEMENT , INC.

3032 JOG RD

3032 JOG RD

LAKE WORTH, FL 33467 US

LAKE WORTH, FL 33467 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: DAVID ROSENTHAL

03/23/2011

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

KASE, HARVEY Name:

Address: 6182 HARBOUR GREENS DR. City-St-Zip: LAKE WORTH, FL 33467 US

Title:

Name: TREMBLEY, CAROL

Address: 6090 HARBOUR GREENS DRIVE City-St-Zip: LAKE WORTH, FL 33467 US

Title: VTD

GARAMELLA, GARY Name: 6082 HARBOUR GREENS DR. Address:

City-St-Zip: LAKE WORTH, FL 33467 US

Title: PD

Name: WENG, PETER

6166 HARBOUR GREENS DRIVE Address: City-St-Zip: LAKE WORTH, FL 33467 US

Title:

Name: CODA, JEANNE

6086 HARBOUR GREENS DR Address: LAKE WORTH, FL 33467 US City-St-Zip:

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: PETER WENG PD