2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003539

FILED Mar 21, 2006 Secretary of State

Entity Name: HARBOR WINDS HOMEOWNERS ASSOCIATION, INC.

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

920 THIRD ST 12187-4 BEACH BLVD

STE B JACKSONVILLE, FL 32246 US

NEPTUNE BEACH, FL 32266 US

Current Mailing Address: New Mailing Address:

920 THIRD ST 12620-3 BEACH BLVD

STE B #301

NEPTUNE BEACH, FL 32266 US JACKSONVILLE, FL 32246 US

FEI Number: 59-3255971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WALLACE, L. DENISE

920 THIRD ST

12620-3 BEACH BLVD

STE B #301

NEPTUNE BEACH, FL 32266 US JACKSONVILLE, FL 32246 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SHERRIE JARNUTOWSKI 03/21/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 YOUNG, KATHYE
 Name:
 SOSNOWSKI, KELLY

 Address:
 12332 SHORE ACRES DR
 Address:
 811 BENTON HARBOR DRIVE 3

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

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

 Name:
 RYALS, KEVIN L
 Name:
 ROBISON, KAREN L

 Address:
 12327 BOSTON HARBOR DR.
 Address:
 12320 SHORE ACRES DRIVE

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: STD () Delete Title: STD (X) Change () Addition SOSNOWSKI, KELLEY VIALLANCOURT, LUCIEN Name: Name: 811 BENTON HARBOR DRIVE E Address: Address: 12342 YORK HARBOR DRIVE City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

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

BASALDUA, RODNEY Name:
806 BENTON HARBOR DR E Address:
JACKSONVILLE, FL 32225 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: KELLY SOSNOWSKI PRES 03/21/2006