

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003539

FILED
Apr 24, 2008
Secretary of State

Entity Name: HARBOR WINDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

JARNUTOWSKI, SHERRIE
12620-3 BEACH BLVD
#301
JACKSONVILLE, FL 32246 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: SOSNOWSKI, KELLY
Address: 811 BENTON HARBOR DRIVE 3
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD () Delete
Name: ROBISON, KAREN L
Address: 12320 SHORE ACRES DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: STD (X) Delete
Name: VAILLANCOURT, LUCIEN
Address: 12342 YORK HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FORBES, SALLY
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP (X) Change () Addition
Name: VAILLANCOURT, LUCIEN
Address: 12620-3 BEACH BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32246

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

I hereby certify that the information supplied with this filing does not qualify 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: SHERRIE JARNUTOWSKI

RA

04/24/2008

Electronic Signature of Signing Officer or Director

Date