2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002271

FILED Jan 21, 2009 Secretary of State

Entity Name: HARBOUR POINT TOWNHOMES HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
2251 MON PALM BE	NET RD ACH GARDEN	NS, FL 33410			
Current Mailing Address:		New Mailing Address:			
2251 MON PALM BEA	NET RD ACH GARDEN	NS, FL 33410			
FEI Number	: 65-0663705	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
2237 MON	CK, PAUL				
PALM BE		NS, FL 33410 US			
The above	ACH GARDEN		purpose of changing its registere	ed office or registered agent, or both,	
The above	ACH GARDEN e named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,	
The above in the Stat	ACH GARDEN e named entity e of Florida. RE:			ed office or registered agent, or both, Date	
The above in the Stat SIGNATU	ACH GARDEN e named entity e of Florida. RE:	submits this statement for the	gent		
The above in the State SIGNATU OFFICER Title: Name: Address:	e named entity e of Florida. RE: Electro S AND DIRECTOR D (WIESENECK, 2237 MONET	onic Signature of Registered ACTORS:) Delete PAUL	gent	Date	
The above in the Stat SIGNATU	e named entity e of Florida. RE: Electro S AND DIRECTOR D (WIESENECK, 2237 MONET PALM BEACH SD (ZALE, DONAL 2244 MONET	r submits this statement for the onic Signature of Registered ACTORS:) Delete PAUL RD GARDENS, FL 33410) Delete	gent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR	

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: JOSEPH J DOMINICK SEC 01/21/2009