2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N95000004661

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

Current Principal Place of Business:

C/O DAVENPORT PROF. PROP. MGMT. INC.
6620 LAKE WORTH ROAD STE F
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

C/O DAVENPORT PROF.PROP. MGMT. INC.
6620 LAKE WORTH ROAD STE F
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 65-0792632 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 SOUTH PINE ISLAND RD
STE 540
PLANTATION, FL 33324 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: GREENBERG, NEIL
Address: 6620 LAKE WORTH ROAD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: VD ( ) Delete
Name: CALI, RICHARD
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: TD ( ) Delete
Name: PETRONELLA, ANGELA
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NEIL GREENBERG PD 04/16/2009

Electronic Signature of Signing Officer or Director — Date