2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# N96000000161

Entity Name: HARBOUR SPRINGS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ONE SAN JOSE PL
34
JACKSONVILLE, FL 32257

New Principal Place of Business:

2900 HARTLEY RD
JACKSONVILLE, FL 32257

Current Mailing Address:

P.O. BOX 57911
JACKSONVILLE, FL 32241

New Mailing Address:

2900 HARTLEY RD
JACKSONVILLE, FL 32257

FEI Number: 59-3361523 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARR, LAUREN
ONE SAN JOSE PL
34
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

STELLAR PROPERTIES
2900 HARTLEY RD
JACKSONVILLE, FL 32257 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: CHRISTOPHER HALLAM 03/20/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TIPPS, DAVID
Address: 276 MELISSA RAY DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD ( ) Delete
Name: COSMATO, JOHN
Address: 298 SUMMER SPRINGS COURT
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: STD ( ) Delete
Name: STIDHAM, PATRICK
Address: 290 SUMMER SPRINGS CT.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: HALEY, FRED
Address: 229 NADIA MICHELLE CT
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: STD (X) Change ( ) Addition
Name: STIDHAM, PATRICK
Address: 290 SUMMER SPRINGS CT
City-St-Zip: JACKSONVILLE, FL 32225

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: DAVID TIPPS PD 03/20/2008
Electronic Signature of Signing Officer or Director Date