2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N96000003941

Entity Name: HARBOUR BLUFF HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3081 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

3081 SW HARBOUR BLUFF PLACE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 65-1065261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARRA, RICHARD K ESQ
4400 PGA BLVD.
SUITE 800
PALM BEACH GARDENS, FL 33410 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: D ( ) Delete
Name: STODDARD III, HARRY C P
Address: 3081 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990 US

Title: D ( ) Delete
Name: MCINTOSH, DAVID J V
Address: 2991 SW MURPHY ROAD
City-St-Zip: PALM CITY, FL 34990 US

Title: D ( ) Delete
Name: FELDSTEEN, LEIGH S
Address: 3091 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: STODDARD, JOANNE A V
Address: 3081 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990 US

Title: D (X) Change ( ) Addition
Name: CHESNEY, FRED S
Address: 3091 SW HARBOUR BLUFF PLACE
City-St-Zip: PALM CITY, FL 34990 US

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: HARRY C STODDARD III PRES 04/28/2009

Electronic Signature of Signing Officer or Director — Date