

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004998

FILED
Mar 27, 2009
Secretary of State

Entity Name: HARBOR POINTE AT GRAND HARBOR PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4380 US HIGHWAY # 1
VERO BEACH, FL 32967 US

New Principal Place of Business:

Current Mailing Address:

4380 US HIGHWAY # 1
VERO BEACH, FL 32967 US

New Mailing Address:

FEI Number: 65-0711844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEECHLY, CLIFFORD S JR
4380 US HIGHWAY # 1
VERO BEACH, FL 32967 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: FELTON, NORRIS
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: M () Delete
Name: SPEECHLY, CLIFFORD S JR
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: DP () Delete
Name: SWEENEY, DOUG
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: DV () Delete
Name: SCHWIN, PAUL
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: DST () Delete
Name: DUTTON, ALICE
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUTH, FRANK
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

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

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

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

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

Title: D () Change (X) Addition
Name: BRODERICK, JOHN
Address: 4380 US HWY 1
City-St-Zip: VERO BEACH, FL 32967

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: CLIFFORD S. SPEECHLY, JR.

MGR

03/27/2009

Electronic Signature of Signing Officer or Director

Date