

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000286

FILED
Mar 23, 2006
Secretary of State

Entity Name: THE HARBORSIDE VILLAGE SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119

New Mailing Address:

FEI Number: 59-3482947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKIN, MICHELE
1166 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 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: HABIG, DAVID
Address: 99 SPINNAKER CIRCLE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: VP () Delete
Name: CAGE, JULIE
Address: 104 SPINNAKER CIRCLE
City-St-Zip: S. DAYTONA, FL 32119

Title: DT () Delete
Name: JUDGE, JOHN
Address: 3 JIB DRIVE
City-St-Zip: S DAYTONA, FL 32119

Title: DP () Delete
Name: AGRONT, ABRAHAM
Address: 38 SPINNAKER CIRCLE
City-St-Zip: S. DAYTONA, FL 32119

Title: DS () Delete
Name: WATKINS, WILLIAM
Address: 102 SPINNAKER CIRCLE
City-St-Zip: SOUTH DAYTONA, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ABRAMS, LENNEY
Address: 75 SPINNAKER CIRCLE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D (X) Change () Addition
Name: MANGUS, JERRY
Address: 17 SPINNAKER CIRCLE
City-St-Zip: S. DAYTONA, FL 32119

Title: DT (X) Change () Addition
Name: RAMPULLA, BARBARA
Address: 125 SPINNAKER CIRCLE
City-St-Zip: S DAYTONA, FL 32119

Title: DVP (X) Change () Addition
Name: AGRONT, ABRAHAM
Address: 38 SPINNAKER CIRCLE
City-St-Zip: S. DAYTONA, FL 32119

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LENNY ABRAMS

DP

03/23/2006

Electronic Signature of Signing Officer or Director

Date