

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004907

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: HARBORDALE CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

1501 SE 15TH STREET  
APT 2-1  
FORT LAUDERDALE, FL 33315

**New Principal Place of Business:**

**Current Mailing Address:**

1900 MIAMI RD  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 65-0773064

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIES, HEATHER  
800 SE 19TH ST  
FORT LAUDERDALE, FL 33316 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: P ( ) Delete  
Name: MAMMANO, MARILYN  
Address: 1501 SE 15TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VP ( ) Delete  
Name: MERGENHAGEN, DONNA  
Address: 1338 SE 17TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: TREA ( ) Delete  
Name: DAVIES, HEATHER  
Address: 800 SE 19TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SEC ( ) Delete  
Name: KAREN, ANDERSON  
Address: 1338 SE 17TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33316

**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:

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: HEATHER DAVIES

RA

01/21/2009

Electronic Signature of Signing Officer or Director

Date