## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N98000000306

**FILED** May 20, 2009 Secretary of State

Entity Name: HARBOUR LANDINGS ESTATES ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1282 4TH STREET SARASOTA, FL 34236

**Current Mailing Address: New Mailing Address:** 

1282 4TH STREET SARASOTA, FL 34236

FEI Number: 65-0848379 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ACTION ASSOCIATION MANAGEMENT, INC. 1282 4TH STREET SARASOTA, FL 34236 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:

Date

## Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

HOLWAY, FLOYD WAGNER, ROD Name: Name: 12507 BAYPOINTE TERRACE Address: 12322 BAYPOINTE TERRACE Address:

City-St-Zip: CORTEZ, FL 34215 City-St-Zip: CORTEZ, FL 34215

Title: ( ) Delete Title:

(X) Change ( ) Addition JENNINGS, JON Name: JENNINGS, JON Name: Address: 12626 BAYPOINTE TER Address: 12626 BAYPOINTE TER City-St-Zip: CORTEZ, FL 34215 City-St-Zip: CORTEZ, FL 34215

Title: (X) Delete Title: () Change () Addition

EVERHART, GEORGE Name: Name: 12522 SAFE HARBOUR DR Address: Address: City-St-Zip: CORTEZ, FL 34215 City-St-Zip:

( ) Delete (X) Change ( ) Addition Title: DΡ Title: Name: BURKHART, GREGORY Name: BURKHART, GREGORY 12515 BAYPOINTE TERRACE 12515 BAYPOINTE TERRACE Address: Address:

City-St-Zip: CORTEZ, FL 34215 City-St-Zip: CORTEZ, FL 34215

Title: DS () Delete Title: (X) Change ( ) Addition

LANSING, DEBORAH LANSING, DEBORAH Name: Name: 12301 BAYPOINTE TERR 12301 BAYPOINTE TERR Address: Address: CORTEZ, FL 34215 City-St-Zip: City-St-Zip: CORTEZ, FL 34215

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: TOM DIETER CEO 05/20/2009