2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2008
Secretary of State

DOCUMENT# N98000005568

Entity Name: HARBOURSIDE AT HARBOUR ISLAND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4174 WOODLANDS PKWY
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

4174 WOODLANDS PKWY
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 59-3578379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOLAN, JAMES
FIRST CHOICE ASSOC., MGMT.
4174 WOODLANDS PKWY.
PALM HARBOR, FL 34685 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: PD ( ) Delete
Name: RABBIA, JOSEPH
Address: 1419 HARBOUR WALK RD
City-St-Zip: TAMPA, FL 33602

Title: S ( ) Delete
Name: PETROSSI, DAN
Address: 1411 HARBOUR WALK RD
City-St-Zip: TAMPA, FL 33602

Title: V ( ) Delete
Name: GLUCKMAN, JEREMY
Address: 1468 HARBOUR WALK RD
City-St-Zip: TAMPA, FL 33692

Title: T ( ) Delete
Name: ANTONETTI, BARBARA
Address: 1401 HARBOR WALK RD.
City-St-Zip: TAMPA, FL 33602

Title: D (X) Delete
Name: MCALECA, JOHN
Address: 1466 HARBOUR WALK ROAD
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WINSON, JERRY II
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: S (X) Change ( ) Addition
Name: TAYLOR, MATT
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: VP (X) Change ( ) Addition
Name: GLUCKMAN, JEREMY
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

Title: T (X) Change ( ) Addition
Name: FERNANDES, JOHN
Address: 4174 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34685

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: JAMES NOLAN AGEN 02/05/2008

Electronic Signature of Signing Officer or Director — Date