

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001900

FILED
Mar 20, 2009
Secretary of State

Entity Name: NORTH HARBOR VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4380 US HWY 1
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

4380 US HWY 1
VERO BEACH, FL 32967

New Mailing Address:

C/O AR CHOICE MANAGEMENT
333 17TH STREET, SUITE 2L
VERO BEACH, FL 32960

FEI Number: 65-0921899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.R. CHOICE MANAGEMENT
333 A.R. CHOICE MANAGEMENT
VERO BEACH, FL 32960 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: DVP () Delete
Name: PLANTE, ROBERT
Address: 333 17TH STREET, SUITE 2L
City-St-Zip: VERO BEACH, FL 32960

Title: DP () Delete
Name: BOWHERS, JIM
Address: 4340 US HIGHWAY #1
City-St-Zip: VERO BEACH, FL 32967

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

Title: DP (X) Delete
Name: BOWHERS, JIM
Address: 333 17TH STREET, SUITE 2L
City-St-Zip: VERO BEACH, FL 32960

Title: DST (X) Delete
Name: PRESTON, JAMES
Address: 333 17TH STREET, SUITE 2L
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: BOWHERS, JAMES
Address: 333 17TH STREET, SUITE 2L
City-St-Zip: VERO BEACH, FL 32960

Title: DST (X) Change () Addition
Name: PRESTON, JAMES
Address: 333 17TH STREET, SUITE 2L
City-St-Zip: VERO BEACH, FL 32960

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: JAMES BOWHERS

DP

03/20/2009

Electronic Signature of Signing Officer or Director

Date