2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2025
Secretary of State
4368658390CC

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Entity Name: HARBOURWOOD HOMEOWNERS ASSOCIATION OF HALLANDALE, INC.

Current Principal Place of Business:

533 LESLIE DRIVE
HALLANDALE BEACH, FL 33009

Current Mailing Address:

C/O ARDENT PROPERTY GROUP, LLC
6625 MIAMI LAKES DRIVE SUITE 312
MIAMI LAKES, FL 33014 US

FEI Number: 59-2014439

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARDENT PROPERTY GROUP LLC
6625 MIAMI LAKES DR.
SUITE 312
MIAMI LAKES, FL 33014 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: ARLENE WEEKES 01/24/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	YELAN, NONNA	Name	LUZHANSKY, DMITRY
Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312	Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	DIRECTOR	Title	TREASURER
Name	TOVB, DMITRY	Name	ROSEN, JUDITH
Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312	Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	SECRETARY	Title	DIRECTOR
Name	LYNNE, LYNETTE	Name	BRITO, MIRTA
Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312	Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312
City-State-Zip:	MIAMI LAKES FL 33014	City-State-Zip:	MIAMI LAKES FL 33014
Title	DIRECTOR		
Name	ISKHAKOV, ELLA		
Address	C/O ARDENT PROPERTY GROUP, LLC 6625 MIAMI LAKES DRIVE SUITE 312		
City-State-Zip:	MIAMI LAKES FL 33014		

I hereby 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 all other like empowered.

SIGNATURE: NONNA YELAN PRESIDENT 01/24/2025

Electronic Signature of Signing Officer/Director Detail — Date