

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N11000003170

Entity Name: HARBOUR ISLE ON ANNA MARIA SOUND MASTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
LAKE WORTH , FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
LAKE WORTH , FL 33463 US

FEI Number: 45-3483577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRS MANAGEMENT ASSOCIATES, INC.
C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
LAKE WORTH , FL 33463 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: MARK QUINN

11/10/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CALE, BRIAN
Address C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY, TREASURER
Name NEUWEILER, DUTCH
Address C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT
Name DEYORGI, WAYNE
Address C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD. STE. 309
City-State-Zip: LAKE WORTH FL 33463

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: WAYNE DEYORGI

PD

11/10/2015

