

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000003170

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

**FILED**  
**Apr 28, 2014**  
**Secretary of State**  
**CC6944812804**

**Current Principal Place of Business:**

1021 OAK STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

1021 OAK STREET  
JACKSONVILLE, FL 32204 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

VESTA PROPERTY SERVICES  
1021 OAK STREET  
JACKSONVILLE, FL 32204 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	VP	Title	SECRETARY, TREASURER
Name	CALE, BRIAN	Name	NEUWEILER, DUTCH
Address	1021 OAK STREET	Address	1021 OAK STREET
City-State-Zip:	JACKSONVILLE FL 32204	City-State-Zip:	JACKSONVILLE FL 32204

Title	PRESIDENT
Name	DEYORGI, WAYNE
Address	1021 OAK STREET
City-State-Zip:	JACKSONVILLE FL 32204

*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**

**PRESIDENT**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date