

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12869

**Entity Name:** HARBOUR CIRCLE AT LONGBOAT KEY CLUB ASSOCIATION, INC.

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC8131321863**

**Current Principal Place of Business:**

HARBOUR OAKS DRIVE  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

5500 MARINA DR  
SUITE 1  
HOLMES BEACH, FL 34217 US

**FEI Number: 59-2671856**

**Certificate of Status Desired: No**

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

HEROLD, WILLIAM MJR  
5500 MARINA DR  
SUITE 1  
HOLMES BEACH, FL 34217 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            PRESIDENT  
Name            ST.HILAIRE, BEVERLY  
Address        2315 HARBOUR OAKS DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            D  
Name            TAUBER, STU  
Address        2383 HARBOUR OAKS DR  
City-State-Zip: LONGBOAT KEY FL 34228

Title            D  
Name            COHEN, ELIZABETH  
Address        2362 HARBOUR OAKS DR  
City-State-Zip: LONGBOAT KEY FL 34228

*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: STU TAUBER**

**DIRECTOR**

**02/23/2015**

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

\_\_\_\_\_  
Date