

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001412

**Entity Name:** HARBOURTOWNE AT COUNTRY WOODS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1697 NANTUCKET CT  
PALM HARBOR, FL 34683**Current Mailing Address:**1697 NANTUCKET CT  
PALM HARBOR, FL 34683**FEI Number: 65-0530802****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CIANFRONE NIKOLOFF GRANT GREENBERG AND SINCLAIR PA  
1964 BAYSHORE BLVD, SUITE A  
DUNEDIN, FL 34698 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: JOSEPH R CIANFRONE****01/22/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                      |                 |                      |
|-----------------|----------------------|-----------------|----------------------|
| Title           | VP, DIRECTOR         | Title           | TREASURER, DIRECTOR  |
| Name            | ALLEN, WILLIAM L     | Name            | BUSH, CURT           |
| Address         | 1697 NANTUCKET CT    | Address         | 1697 NANTUCKET CT    |
| City-State-Zip: | PALM HARBOR FL 34683 | City-State-Zip: | PALM HARBOR FL 34683 |
| Title           | SECRETARY, DIRECTOR  | Title           | PRESIDENT, DIRECTOR  |
| Name            | NOHREN, JOHN E       | Name            | LOCHNER, FREDERICK   |
| Address         | 819 CR1              | Address         | 1697 NANTUCKET CT    |
| City-State-Zip: | PALM HARBOR FL 34683 | City-State-Zip: | PALM HARBOR FL 34683 |
| Title           | DIRECTOR             |                 |                      |
| Name            | RADDATZ, MICHAEL     |                 |                      |
| Address         | 1697 NANTUCKET CT    |                 |                      |
| City-State-Zip: | PALM HARBOR FL 34683 |                 |                      |

*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: FREDERICK LOCHNER****PRESIDENT****01/22/2020**

Electronic Signature of Signing Officer/Director Detail

Date