

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03567

**FILED**  
**Mar 27, 2013**  
**Secretary of State**  
**CC1322663361**

**Entity Name:** HARBOUR VILLA CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

615 DREAM ISLAND RD  
LONGBOAT KEY, FL 34228-1520

**Current Mailing Address:**

615 DREAM ISLAND RD  
LONGBOAT KEY, FL 34228-1520

**FEI Number: 65-0047145**

**Certificate of Status Desired: No**

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

WELLER, RICHARD  
1408 8TH AVENUE WEST  
BRADENTON, FL 34205 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 P  
Name WOELFLING, ROBERT  
Address 118 ELM AVENUE  
City-State-Zip: HERSHEY PA 17033

Title D  
Name GRIFFIN, TERRY  
Address 1301 N. LAKE SYBELIA DRIVE  
City-State-Zip: MAITLAND FL 32751

Title D  
Name DIMLER, CHARLES  
Address 7203 KIOWA CIRCLE  
City-State-Zip: CHANASSEN MN 55317

Title VP  
Name BAKER, LARRY  
Address PO BOX 283  
City-State-Zip: MINOCQUA MN 54548

Title D  
Name WEBSTER, MARY LOU  
Address 615 DREAM ISLAND ROAD  
City-State-Zip: LONGBOAT KEY FL 34228

Title ST  
Name STYLES, GEOFF  
Address 1 CHEDINGTON PLACE  
STE 8-D  
City-State-Zip: TONRONTON ONTARIO M4N3R4

Title DIRECTOR  
Name DUJARDIN, DAVID  
Address 513 EAST DAVIES LOOP ROAD  
City-State-Zip: LAKE STEVENS WA 98258

*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: ROBERT WOELFLING**

**PRESIDENT**

**03/27/2013**

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

\_\_\_\_\_  
Date