#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03567

Entity Name: HARBOUR VILLA CLUB CONDOMINIUM ASSOCIATION, INC.

FILED Feb 13, 2016 Secretary of State CC0671261368

# **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: Yes

# 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

Date

BALTIMORE MD 21214

#### Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

NameGRIFFIN, TERRELLNameDIMLER, CHARLESAddress1301 N. LAKE SYBELLA DRAddress7203 KIOWA CIRCLE

City-State-Zip: MAITLAND FL 32751 City-State-Zip: CHANASSEN MN 55317

Title VP Title D

NameBAKER, LARRYNameWEBSTER, MARY LOUAddressPO BOX 283Address615 DREAM ISLAND ROADCity-State-Zip:MINOCQUA MN 54548City-State-Zip:LONGBOAT KEY FL 34228

Title ST Title DIRECTOR

Name STYLES, GEOFF Name MINK, TOM
Address 1 CHEDINGTON PLACE Address 4 HUME CT

STE 8-D City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: TONRONTO ONTARIO M4N3R4

Title DIRECTOR

Name THOMPSON, PATRICK Address 19805 NINA STREET City-State-Zip: OMAHA NE 68130

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: LARRY BAKER VP 02/13/2016