FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 716
1. Corporation Name

716710

(9)

HARBOUR CLUB VILLAS CONDOMINIUM CORPORATION, INC

FILED Jan 29 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Address							
		•							
1530 N.E. 105TH STREET Miami Shores FL 33138		1530 N.E. 105TH STREET MIAMI SHORES FL 33138-2116							
						3. Date Incorporated or Qualified 06/10/1969	3a. Date of Las 07/11/		
2. Principal Pia	ace of Business	28. Mailing Address				4. FEI Number		Applied For	
21		26				59-1388694 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be				
23		28		Trust Fund Contribution					
Zip	Country	Zip	Cou	untry		8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30	,		Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent		B1 N	lame	10. Name and Address of New Reg	Istered Agent		
				" "	iame				
BROWN, DOROTHY				82 Street Address (P.O. Box Number is Not Acceptable)					
	RTHEAST 105TH STREET			83					
MIAMI SH	IORES FL 33138								
	•			84 C	City		FL 85 Z	ip Code	
11. Pursuant to	the provisions of Sections 617.0502	and 617.1508, Florida Statut	es, the a	bove-na	amed c	orporation submits this statement for the pu	rpose of changin	g its registered	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NO1E: Registered agent and title if applicable.) 12. OFFICERS AND DIRECTORS					gnature re	ADDITIONS/CHANGES TO OFFICE		OBS IN 12	
TITLE	D	DELETE	1.1 TI	ITLE	19	g-1. /		(
NAME	LACOMBE, DORIS		12 N	AME		Sec. P Oble n beng, AL 1557 N.E.105 ST. MIAMI Shones, FL 33138			
STREET ADDRESS	1500 NE 105 ST		1.3 STREET ADDRESS		ORESS .	1557 NE 105 ST.	,	\ {	
CITY-ST-ZIP	MIAMI SHORES FL 33/38		1.4 CI	ITY-ST-Z	IP /	MIAMI Shones, FL 33/38	(Orchsi)	647)	
TITLE	P DELETE			2.1 TITLE			Chang	ge 🔲 Addition C	
NAME	BROWN, DOROTHY		2.2 NAME						
STREET ADDRESS	1560 N.E. 105TH ST.		2.3 STREET ADDRESS		DRESS			i	
CITY-ST-ZIP	MIAMI SHORES, FL 00000 33		2 4 City-St-ZIP		IP.				
TITLE	D DELETE		3.1 TI	3.1 TITLE		-	Chang	ge 🔲 Addition	
NAME	DEETZ, SANDY		3.2 N	3.2 NAME				ļ	
STREET ADDRESS	1112 12			3.3 STREET ADDRESS					
CITY-ST-ZIP				3.4. CITY - ST - ZIP					
TITLE	VP DELETE			4.1 TITLE			∐ Chang	ge [_] Addition [
NAME			4.2 N	IAME					
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP	T be ere		TY-ST-Z	Р		<u> </u>			
TITLE	D	L DELETE	5.1 1		-		∟ Chanç	ge L. Addition	
NAME OTDEET ADDRESS	LAURENCE, BUD			2 NAME			İ		
STREET ADDRESS				5.3 STREET ADDRESS				İ	
CITY-ST-ZIP				ITY-ST-ZI	P		Chang	ie [] Addition	
TITLE	· -		4	6.1 TITLE 6.2 NAME			L ∪ cuan(Je L MOOROH	
NAME DZDCCT ADDDCCC	MURPHY, LARRY 1558 N.E. 105TH ST.				,oree				
STREET ADDRESS				TREET ADD				i	
CITY-ST-ZIP	MIAMI SHORES FL 33/38	wish ship filipp place and avail		TY-ST-71		ted in Contine 110.07/9Vi). Floride Statutes	f f outle a set for all		

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.