FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -9 PM 12:02

DOCUMENT # 719848 (4)

1. Corporation Name
HARBOUR CLUB CONDOMINIUM NO. THREE, INC.

Principal Place of Business	Mailing Address
2753 STATE RD 580 STE 207 CLEARWATER FL 34621 US	2753 STATE RD 580 STE 207 CLEARWATER FL 34621 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/14/1970
3a. Date of Last Report: 03/08/1994
4. FEI Number: 23-7347656 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

POWLEY, MARY
100 BLUFF VIEW DRIVE
#611C
BELLEAIR BLUFFS FL 34640

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	D	☒ Change ☐ Addition
NAME	SUTTON, PATRICIA	1.2 NAME	SUNDELIUS, ROY	
STREET ADDRESS	100 BLUFF VIEW DR 310-C	1.3 STREET ADDRESS	100 BLUFF VIEW DRIVE #610C	
CITY-ST-ZIP	BELLEAIR BLUFFS, FL00000	1.4 CITY-ST-ZIP	BELLEAIR BLUFFS FL 34640	
TITLE	VD	2.1 TITLE	D	☐ Change ☒ Addition
NAME	WALSH, BARBARA	2.2 NAME	WOLFGRAM, LES	
STREET ADDRESS	100 BLUFF VIEW DR. 110C	2.3 STREET ADDRESS	210 1ST AVENUE EAST	
CITY-ST-ZIP	BELLEAIR BLUFFS FL	2.4 CITY-ST-ZIP	PINE CITY MN 55063	
TITLE	SD	3.1 TITLE		☐ Change ☐ Addition
NAME	POWLEY, MARY	3.2 NAME		
STREET ADDRESS	100 BLUFF VIEW #611C	3.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEAIR BLUFFS FL	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	FOGARETY, ANNA	4.2 NAME		
STREET ADDRESS	100 BLUFF VIEW DR. 109-C	4.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEAIR BLUFFS FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	PRIESTMAN, LES	5.2 NAME		
STREET ADDRESS	100 BLUFFVIEW DR. #501C	5.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEAIR BLUFFS FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	P/D	☒ Change ☐ Addition
NAME	HEINZ, BOB	6.2 NAME		
STREET ADDRESS	100 BLUFF VIEW #210C	6.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEAIR BLUFFS FL 34640	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Robert W Heinz 2/2/95 (813) 581-3278
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
Robert W. Heinz

0010663