


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 721108 (9)
 1. Corporation Name
HARBOUR HILL CONDOMINIUM APARTMENTS ASSOCIATION, INC.



Principal Place of Business 700 BEACH DRIVE. N.E. ST. PETERSBURG FL 33701	Mailing Address 700 BEACH DRIVE. N.E. ST. PETERSBURG FL 33701
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3. Date Incorporated or Qualified 06/07/1971	Applied For Not Applicable
4. FEI Number 59-1428703	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
**WALLACE, JOHN
 700 BEACH DR NE
 PH-1
 ST PETERSBURG FL 33701**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	FD S	1.1 TITLE	T D
NAME	FLEMING, JEAN	1.2 NAME	David Rugen
STREET ADDRESS	700 BEACH DR NE #805	1.3 STREET ADDRESS	700 Beach Dr. NE #705
CITY-ST-ZIP	ST PETERSBURG FL	1.4 CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	PD	2.1 TITLE	D
NAME	WALLACE, JOHN	2.2 NAME	Charles Carrere
STREET ADDRESS	700 BEACH DR NE PH-1	2.3 STREET ADDRESS	700 Beach Dr. NE #704
CITY-ST-ZIP	ST PETERSBURG FL	2.4 CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	XR V D	3.1 TITLE	OV
NAME	SUMNER, RICHARD	3.2 NAME	
STREET ADDRESS	700 BEACH DRIVE NE #302	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	VD D	4.1 TITLE	D
NAME	STANTON, KAY	4.2 NAME	
STREET ADDRESS	700 BEACH DR NE 407	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	D
NAME		5.2 NAME	Elizabeth Thurston
STREET ADDRESS		5.3 STREET ADDRESS	700 Beach Dr. NE #708
CITY-ST-ZIP		5.4 CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE		6.1 TITLE	D
NAME		6.2 NAME	Joe Hores
STREET ADDRESS		6.3 STREET ADDRESS	700 Beach Dr. NE #806
CITY-ST-ZIP		6.4 CITY-ST-ZIP	St. Petersburg, FL 33701

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14. I hereby certify that the information supplied with this filing 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.

SIGNATURE: John P. Wallace, **JOHN P. WALLACE 3/4/98 813/898-5984**

CF2E037 (10/97)