2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

FILED DOCUMENT # 728711 Mar 17, 2000 8:00 am 1. Entity Name **Secretary of State** HARBORDALE CONDOMINIUM ASSOCIATION, INC. 03-17-2000 90015 014 ****61.25 Principal Place of Business Mailing Address 1001 SE 16TH ST. 1001 SE 16TH ST. FT LAUDERDALE FL 33316-2196 FT LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1612258 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) MILES, SAMMIE 1323 SE 17TH STREET SUITE 694 Zip Code FL FORT LAUDERDALE FL 33316 8. 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition TITLE SHE CONNELLY 1001 SETBELSH TITLE ☐ Delete RICARDS, CHARLES NAME NAME STREET ADDRESS 1001 SE 16TH STREET - #13 STREET ADDRESS FF Landwodele, FL 3371 6 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33316 Generice Larechia Change Addition 1 TITLE ☐ Delete TITLE DECKER, JEAN NAME NAME 1001 SE 16th St STREET ADDRESS STREET ADDRESS 1001 SE 16TH ST, #10 Ft budrdale FC33316 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE, FL 00000 33316 ☐ Change ☐ Addition Delete TITLE TITLE NAME THORVENEL, BARBARA NAME STREET ADDRESS STREET ADDRESS 1001 SE 16 STREET 313 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33316 Change Addition ☐ Delete TITLE TITLE NAME MILES, SAMMIE NAME STREET ADDRESS STREET ADDRESS 1323 SE 17TH ST, #694 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33316 Delete Change ☐ Addition TITLE τιτι F NAME MURRAY, JANET BENTON NAME STREET ADDRESS STREET ADDRESS 1010 SE 15TH STREET, #211 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33316 Change Addition TITLE ☐ Delete TITLE Sue Cornelly NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if

Daytime Phone #