

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State

03-02-2004 90043 049 ****61.25

DOCUMENT # 728711 1. Entity Name HARBORDALE CONDOMINIUM ASSOCIATION, INC.																																																																																		
Principal Place of Business 1001 SE 16TH ST. FT LAUDERDALE FL 33316			Mailing Address 1001 SE 16TH ST. FT LAUDERDALE FL 33316																																																																															
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																
City & State Zip		City & State Zip		4. FEI Number 59-1612258 Applied For ☐ Not Applicable																																																																														
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent MILES, SAMMIE 1001 SE 16TH ST #3 PO BOX 460682 FORT LAUDERDALE FL 33346																																																																																
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating)																																																																																
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State																																																																																
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%;">Delete</td> </tr> <tr> <td></td> <td>DENEYS, MARY</td> <td>1001 SE 16 ST #13</td> <td>FORT LAUDERDALE FL 33346</td> <td>☒</td> </tr> <tr> <td></td> <td>COUTER, CHRISTINE</td> <td>1010 SE 15 TH ST # 110</td> <td>FORT LAUDERDALE FL 33346</td> <td>☒</td> </tr> <tr> <td></td> <td>MILLER, MICHAEL</td> <td>1001 S E 16 ST # 8</td> <td>FT. LAUDERDALE FL 33316</td> <td>☒</td> </tr> <tr> <td></td> <td>MILES, SAMMIE</td> <td>1323 SE 17TH ST, #694</td> <td>FT. LAUDERDALE FL 33316</td> <td>☐</td> </tr> <tr> <td></td> <td>LAVECCIA, GENEVIVE</td> <td>1001 S E 16 ST # 4</td> <td>FORT LAUDERDALE FL 33316</td> <td>☐</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐</td> </tr> </table>		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete		DENEYS, MARY	1001 SE 16 ST #13	FORT LAUDERDALE FL 33346	☒		COUTER, CHRISTINE	1010 SE 15 TH ST # 110	FORT LAUDERDALE FL 33346	☒		MILLER, MICHAEL	1001 S E 16 ST # 8	FT. LAUDERDALE FL 33316	☒		MILES, SAMMIE	1323 SE 17TH ST, #694	FT. LAUDERDALE FL 33316	☐		LAVECCIA, GENEVIVE	1001 S E 16 ST # 4	FORT LAUDERDALE FL 33316	☐					☐	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%;">Change</td> <td style="width: 10%;">Addition</td> </tr> <tr> <td></td> <td>TOM B #13</td> <td>1001 SE 16 ST</td> <td>FT LAUDERDALE FL 33346</td> <td>☐</td> <td>☒</td> </tr> <tr> <td></td> <td>CHRISTINE CLONTER #13</td> <td>1001 SE 16 ST</td> <td>FT. LAUDERDALE, FL 33316</td> <td>☒</td> <td>☐</td> </tr> <tr> <td></td> <td>SANET MURRAY #13</td> <td>1001 SE 16 ST</td> <td>FT. LAUDERDALE FL 33346</td> <td>☐</td> <td>☒</td> </tr> <tr> <td></td> <td>MILES, SAMMIE</td> <td>PO # 4620682</td> <td>FT. LAUDERDALE FL 33346</td> <td>☒</td> <td>☐</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐</td> <td>☐</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐</td> <td>☐</td> </tr> </table>				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition		TOM B #13	1001 SE 16 ST	FT LAUDERDALE FL 33346	☐	☒		CHRISTINE CLONTER #13	1001 SE 16 ST	FT. LAUDERDALE, FL 33316	☒	☐		SANET MURRAY #13	1001 SE 16 ST	FT. LAUDERDALE FL 33346	☐	☒		MILES, SAMMIE	PO # 4620682	FT. LAUDERDALE FL 33346	☒	☐					☐	☐					☐	☐
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12. 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 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 changed, or on an attachment with an address, with all other like empowered.																																																																																		
SIGNATURE: <u>Sammie Miles</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																		

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