4/2/01

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
04-02-2001 90321 036 ****61.25

DOCUMENT # 741741

1. Entity Name

HARBOUR 92 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
200 HARBOR VIEW DRIVE #508 TAVERNIER FL 33070	200 HARBOR VIEW DRIVE #508 TAVERNIER FL 33070

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1864784 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
[redacted] VOSS, HOWARD 200 HARBOR VIEW DRIVE [redacted] #PH6 TAVERNIER FL 33070	Name HOWARD VOSS Street Address (P.O. Box Number is Not Acceptable) 200 HARBORVIEW DR # PH6 City TAVERNIER FL Zip Code 33070

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 HOWARD VOSS PRESIDENT Howard A Voss President 3/27/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
				☐ Change	☑ Addition
TITLE	TD	☐ Delete	TITLE	SECRETARY	
NAME	VOSS, HOWARD		NAME	LEONTARAS, CLAUDIA	
STREET ADDRESS	200 HARBORVIEW DR PH6		STREET ADDRESS	200 HARBORVIEW DR # PH3	
CITY-ST-ZIP	TAVERNIER FL 33070		CITY-ST-ZIP	TAVERNIER FL 33070	
				☐ Change	☑ Addition
TITLE	D	☑ Delete	TITLE	TREASURER	
NAME	SCHMITT, JANE		NAME	TASHJIAN, CHARLES	
STREET ADDRESS	4443 S.W. 16TH STREET		STREET ADDRESS	200 HARBORVIEW DR #505	
CITY-ST-ZIP	MIAMI FL 33134		CITY-ST-ZIP	TAVERNIER FL 33070	
				☐ Change	☑ Addition
TITLE	D	☑ Delete	TITLE	DIRECTOR	
NAME	BECKER, PAUL		NAME	SEBBEN, MARY #501	
STREET ADDRESS	200 HARBORVIEW DRIVE APT. 301		STREET ADDRESS	200 HARBORVIEW DR	
CITY-ST-ZIP	TAVERNIER FL 33070		CITY-ST-ZIP	TAVERNIER FL 33070	
				☐ Change	☑ Addition
TITLE	SD	☐ Delete	TITLE	DIRECTOR	
NAME	BISHOP, LYNN		NAME	STRATTON, MARIAN #307	
STREET ADDRESS	200 HARBOR VIEW DR, 102		STREET ADDRESS	200 HARBORVIEW DR	
CITY-ST-ZIP	TAVERNIER FL 33070		CITY-ST-ZIP	TAVERNIER, FL 33070	
				☐ Change	☑ Addition
TITLE	D	☐ Delete	TITLE	DIRECTOR	
NAME	O'NEIL, BRIAN		NAME	FIBBONS, THOMAS	
STREET ADDRESS	200 HARBORVIEW DRIVE PH5		STREET ADDRESS	200 HARBORVIEW DR #104	
CITY-ST-ZIP	TAVERNIER FL 33070		CITY-ST-ZIP	TAVERNIER, FL 33070	
				☐ Change	☑ Addition
TITLE	D	☑ Delete	TITLE	DIRECTOR	
NAME	FULWIDER, THOMAS		NAME	KRAMER, MARYANN	
STREET ADDRESS	200 HARBOR VIEW DR., #309		STREET ADDRESS	200 HARBOR VIEW DR #109	
CITY-ST-ZIP	TAVERNIER FL		CITY-ST-ZIP	TAVERNIER, FL 33070	

CR2E037 (10/00)

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: [illegible] HOWARD A VOSS PRESIDENT 3/27/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #