2021 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
05-11-2001 90073 020 ****61.25

DOCUMENT # 750911

1. Entity Name

HARBORTOWN CONDOMINIUM ASSOCIATION OF THE LANDIN

Principal Place of Business	Mailing Address
6213-A PRESIDENTIAL CT FT MYERS FL 33919 US	6213-A PRESIDENTIAL CT FT MYERS FL 33919 US

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 59-1963003 ☐ 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
HENKE, C J 6213-A PRESIDENTIAL CT FT MYERS FL 33919	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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: 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		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FENN, DR JOHN 5000 HARBORTOWN LN FT. MYERS FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DORIS MILLMAN 4837 SPRINGLIN DRIVE FORT MYERS, FL 33919	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ANDRUS, PAT 5010 DOCKSIDE DR #201 FORT MYERS FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BLAKE, MATHERLY 4980 DOCKSIDE DR #104 FORT MYERS FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DALTON, BOB 4755 HARBORTOWN AVE FT MYERS FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DR. IRWIN YARMO 5044 HARBORTOWN LANE FORT MYERS, FL 33919	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KING, DON 4739 HARBORTOWN LN FT MYERS FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARKS, STANLEY 4703 HARBORTOWN LN FT MYERS FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Doris Millman Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #