

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

200.70

0051511

FILED

03 MAY -1 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 750911

1. Entity Name

HARBORTOWN CONDOMINIUM ASSOCIATION OF THE LANDIN
GS, INC.



Principal Place of Business

6213-A PRESIDENTIAL CT
FT MYERS FL 33919
US

Mailing Address

6213-A PRESIDENTIAL CT
FT MYERS FL 33919
US

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLMAN, DORIS 4837 SPRINGLIN DRIVE FT. MYERS FL 33919	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARKS, STANLEY 4703 HARBOR TOWN LANE FORT MYERS FL 33919	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAKE, MATHERLY 4980 DOCKSIDE DR #104 FORT MYERS FL 33919	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO CORACE, JAMES 4838 SPRINGTIME DR FT MYERS FL 33919	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BRESSLER, GINNY 5015 HARBORTOWN LANE #201 FT MYERS FL 33919	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLEMENTE, LINDA 5031 HARBORTOWN LANE FT MYERS FL 33919	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Good, John 4850 Dockside Drive #102 Fort Myers, FL 33919	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Foreman, Arlene 4841 Springline Dr Fort Myers, FL 33919	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jack, John 4765 Harbortown Lane Fort Myers, FL 33919	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100017848251 05/01/03--01087--025 **61.25	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Dunlap, Terry 4980 Dockside Drive #102 Fort Myers, FL 33919	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Clementz, Linda	☒ Change ☐ Addition

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:

Linda Clementz
4-17-03

CR2E037 (10/02)