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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 751690 (9)
1. Corporation Name
HARBOR CREST 400 PROPERTY OWNERS, INC.



Principal Place of Business Mailing Address
13940 ANONA HEIGHTS DRIVE APT. #1 LARGO FL 34644-3001
13940 ANONA HEIGHTS DRIVE APT. #1 LARGO FL 33774-3000

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified 03/25/1980 3a. Date of Last Report 03/13/1996
4. FEI Number 59-1288813 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
EMALA, FLORENCE
13940 ANONG HEIGHTS DR #107
APT. #21
LARGO FL 34644

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P <input checked="" type="checkbox"/> DELETE
NAME	KEYES, VINCENT
STREET ADDRESS	1394 ANONA HTS DR #117
CITY-ST-ZIP	LARGO FL
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	EVANS, RAY
STREET ADDRESS	13940 ANONA HTS DR #3
CITY-ST-ZIP	LARGO FL
TITLE	S <input type="checkbox"/> DELETE
NAME	TRIPP, RUTH
STREET ADDRESS	13940 ANONA HTS DR #2
CITY-ST-ZIP	LARGO FL
TITLE	DT <input type="checkbox"/> DELETE
NAME	EMALA, FLORENCE
STREET ADDRESS	13940 ANONA HGD DR #107
CITY-ST-ZIP	LARGO FL
TITLE	DA <input type="checkbox"/> DELETE
NAME	STEUJLET, CHARLOTTE
STREET ADDRESS	13940 ANONA HTS DR #110
CITY-ST-ZIP	LARGO FL
TITLE	D <input type="checkbox"/> DELETE
NAME	BUESCCHER, JOYCE
STREET ADDRESS	13940 ANONA HTS DRIVE #118
CITY-ST-ZIP	LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	EVANS, RAY
1.3 STREET ADDRESS	13940 ANONA HTS DR. #3
1.4 CITY-ST-ZIP	LARGO, FL. 33774
2.1 TITLE	VF <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KEYES, VINCENT
2.3 STREET ADDRESS	13940 ANONA HTS DR #117
2.4 CITY-ST-ZIP	LARGO, FL. 33774
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Raymond L. Evans 1/22/97 813-595-3605
RAYMOND L. EVANS Date Daytime Phone # 0051817

CR2E037 (9/96)