## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

HARTRIDGE HARBOR OWNERS' ASSOCIATION INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 08 1997 8:00am Secretary of State



E. Principal Place of Business   Ze. Mailing Address   Ze. Mailing	2180 WEST SR ( LONGWOOD FL		2180 WEST SR 434. SUITE 5000 LONGWOOD FL 32778-5044				
Surface Appl. 4, etc.    Solida							
Surface Appl. 4, etc.    Solida	2. Principal Place of Business 2a. Mailing Address				4. FEI Number Applied For		
Surface Appl. 4, etc.    Solida				31		-NOT APPEROABLE 59-3148697 Not Applicable	
Added to Face   Added to Fac	<u> </u>					5 Cartificate of Status Desired SB.75 Additional	
Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address   10. Name and Address   10. Name and Address of New Registered Agent   10. Name and Address   10.	City & State Winte		, Flor	ida	, , , , , , , , , , , , , , , , , , , ,		
SNYDER, RON \$567 HARBOR CIR. WINTER HAVEN FL 33881  82 Street Additions (F.O., Dox Number is Not Acceptable) \$548 Harbor Circle  11. Pursuant to the provisions of Socious \$17.0502 and \$17.1508, Fiorida Statutes.  12. Virtual Control of Property and Addition (F.D.)  13. ADDITIONS(CHANGES TO OFFICERS AND DIRECTORS IN 12 In It is statement to the purpose of changing its registered again. I emplety and principle of grant and apperphilip arginations of Socious 617.0503, Fiorida Statutes.  14. Pursuant to the provisions of Socious 617.0503, Fiorida Statutes.  15. Pursuant vivia, and apperphilip arginations of Socious 617.0503, Fiorida Statutes.  16. SIGNATURE  Superaw, typical or pinced rame of engineted spark and off principals.  18. Pursuant vivia, and apperphilip arginations of Socious 617.0503, Fiorida Statutes.  18. Barbara B. Beazell, President 4/2/97  12. DEFICIENS AND DIRECTORS IN 12  18. ADDITIONS(CHANGES TO OFFICERS AND DIRECTORS IN 12)  19. VPD  Superaw, typical or pinced rame of engineted spark and office of principals.  19. PD  Superaw, typical or pinced rame of engineted spark and office of pincipals.  19. PD  Superaw, typical or pincipals.  19. PD  Superaw, typical or pincipals.  20. PTFICERS AND DIRECTORS IN 12  10. PVP  10. VPD  Superaw, typical or pincipals.  10. PVP  Superaw			`			Florida Statutes XX Yes \( \bigcap \ No	
SNYDER, RON 367 HARBOR CIR. WINTER HAVEN FL 33881  84 City Winter Haven FL S JYD Eggle 11. Pursuant to the provisions of Socions 617.0502 and 617.1508. Forcida Statutos, the above-named corporation submits this statement for the purpose of changing lis registered agent. Jenn-orgar with, and acceptable purpose of of 75.053. Picolos Statutos 4 City Winter Haven FL S JYD Eggle 11. Pursuant to the provisions of Socions 617.0502 and 617.1508. Forcida Statutos, the above-named corporation submits this statement for the purpose of changing lis registered agent. Jenn-orgar with, and acceptable purposes of 57.0503. Picolos Statutos SIGNATURE STORMA UP TO FIGE IS AND DIRECTIORS 13. Barbara B. Beazell, President Suprison byte of present and superpolitor purpose of 17.0503. Picolos Statutos SIGNATURE STORMA UP TO FIGE IS AND DIRECTIORS 13. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIORS 13. MADE SANDERS OF ABBOR CIRCLE NV UNITER HAVEN FL 12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  12. ADDITIONS/CHANGES TO OFFICE IS AND DIRECTIONS IN 12  13. SIRET ADDRESS  14. TITLE  15. TITLE			Registered Agent			10. Name and Address of New Registered Agent	
SNYDER, RON \$567 HARBOR CIR. WINTER HAVEN FL 33881  84 City Winter Haven FL 85 33886*  11. Pursuant to the provisions of Socions 617.0502 and 617.1508, Fiorical Statutos, the observation submits this statement for the purpose of changing its registered eigent, or both, in the State of Fiorical Statutos, the observation submits this statement for the purpose of changing its registered eigent or registered agent, or both, in the State of Fiorical Statutos, the observation of directors. Thereby accept the appointment as registered eigent or registered agent, or both, in the State of Fiorical Statutos, the observation of directors. Thereby accept the appointment as registered office or registered agent, or both, in the State of Fiorical Statutos, agent agent and appropriate the city of purposes of changing its registered office or registered degent, or both, in the State of Fiorical Statutos, agent agen	L <sub>2</sub>			81	Name	Rarhara R. Reazell	
WINTER HAVEN FL 33881  11. Pursuant to the provisions of Socions 617.0602 and 617.1508, Florida Statutes, the above-named corporations submits this statement for the purpose of changing its registered agent. I employed agent. I employed with and expertise purpose of Socions 617.0503, Florida Statutes.  11. Pursuant to the provisions of Socions 617.0602 and 617.1508, Florida Statutes, the above-named corporations busmits this statement for the purpose of changing its registered agent. I employed and the provisions of the provisions of control of the purpose of changing its registered agent. I employed with and expertise purpose of Socions 617.0503, Florida Statutes.  12. Separation bytes of private days we still experted Agent expectation and of directors. I hereby accept the experted perposence days and of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the experted accept the proprised of directors. I hereby accept the perpose of changing its registered agent. I employed a propriet of directors. I hereby accept the perpose of changing its registered agent. I employed a propriet of directors. I hereby accept the perpose of changing its registered agent. I employed a propriet of directors. I hereby accept the perpose of changing its registered agent. I employed a propriet of directors. I hereby accept the perpose of changing its registered agents.  12. Title  12. OFFICER AND DIRECTORS  13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Sample accept the provisions of the propriet of accept the perpose of changing its registered agent.  13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY-SI-ZP  15. TITLE  15. TITL	SNYDER, RON 82 Street Addre				Address (P.O. Box Number is Not Acceptable)		
The provisions of Socilons 617.06.02 and 617.16.06, Fiorida Statutos, the above-named corporation submitted that provisions of Socilons 617.06.02 and 617.16.06, Fiorida Statutos, the above-named corporation submitted that statement for the purpose of changing its registered agent. Learn emplay with, and accept the opporation of the special statement for the purpose of changing its registered agent. Learn emplays with, and accept the opporation of the special statement for the purpose of changing its registered agent. Learn emplays with, and accept the opporation of the special statement for the purpose of changing its registered agent. Learn emplays the control of the special statement for the purpose of changing its registered agent. Learn emplays the control of the special statement for the purpose of changing its registered agent. Learn emplays the control of the special statement for the purpose of changing its registered agent. Learn employer registered agent. Learn employers agent. Learn em					· · · · · · · · · · · · · · · · · · ·		
office or registered agent, or both, in this State of Horiza, Such change was authorized by the corporations board of directors. I neterly accept the approximent as registered agent, and deperation and exception subject of the proximal properties. The proximal properties agent and approximate of subject and approximate approximate and approximate and approximate approximate approximate and approximate and approximate and approximate and approximate app							
BIGNATURE	11. Pursuant to the provisions of Soctions 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Dubu D. De					
THILE NAME SNYDER, RON STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL STD WINTER HAVEN FL STREET ADDRESS STREET ADD			·		nt signature		
NAME STREET ADDRESS STOF HARBOR CIRCLE NW WINTER HAVEN FL  STD KENNEDY, DOT STREET ADDRESS STORY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN FL  OUTY-ST-ZPP TITLE  DELETE  DELETE  STD KENNEDY, DOT STREET ADDRESS STORY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN, FL  OUTY-ST-ZPP WINTER HAVEN FL  OUTY-ST-ZPP  TITLE  DELETE  DELETE  DELETE  DELETE  STD WINTER HAVEN, FL  OUTY-ST-ZPP  TITLE  DELETE  STD WINTER HAVEN FL  OUTY-ST-ZPP  TITLE  DELETE  STD WINTER HAVEN FL  STREET ADDRESS STREET					тТ		
STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL  STD STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL  STD STREET ADDRESS KENNEDY, DOT STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 00000  WINTER HAVEN, FL 00000  MINTER HAVEN, FL 00000				1.2 NAME		Beazell, Barbara B.	
MINTER HAVEN FL				1.3 STREET			
TITLE NAME NAME KENNEDY, DOT STREET ADDRESS OCTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE STREET ADDRESS CITY-ST-ZIP Change Addition A				1.4 CITY - S	1-2IP	Winter Haven, FL 33881	
STREET ADDRESS CITY-ST-ZIP VINTER HAVEN, FL 00000  INTILE NAME STREET ADDRESS CITY-ST-ZIP NETTLETON, CAROL 3559 HARBOR CIRCLE NW WINTER HAVEN FL  32 NAME 3559 HARBOR CIRCLE NW WINTER HAVEN FL  3554 Harbor Circle Winter Haven, FL 33881  Winter Haven, FL 33881  ITILE NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  ITILE NAME STREET ADDRESS CITY-ST-ZIP			X) DELETE	2.1 TITLE		V/D ☐ Change ☐ Additio	
CHY-ST-ZIP   WINTER HAVEN, FL 00000	NAME	KENNEDY, DOT		2.2 NAME		Harmon, Patricia	
TITLE NAME NETTLETON, CAROL STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL  DELETE  Addition  Addition  Hill, Carrie 3554 Harbor Circle Winter Haven, FL 33881  T/D Kaylor, Anne P.O. Box 7126 N/A Winter Haven, FL 33883-7126  CITY-ST-ZIP  TITLE  NAME AGDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  DELETE  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Change Addition  Change Addition  Addition  Addition  Addition  Addition  Addition  Change Addition  Addition	STREET ADDRESS			2.3 STREET			
NAME   NETTLETON, CAROL   32 NAME   3559 HARBOR CIRCLE NW   WINTER HAVEN FL   DELETE   4.1 TITLE   MAME   4.2 NAME   4.2 NAME   4.4 CITY-ST-ZIP   WINTER HAVEN FL   DELETE   5.1 TITLE   DELETE   5.3 STREET ADDRESS   CITY-ST-ZIP   MINTER HAVEN FL	CITY-ST-ZIP		NY	_	ST-ZIP	Winter Haven, FL 33881	
STREET ADDRESS   S359 TAARDON CITCLE NY   S35 TREET ADDRESS   S4.CITY-S1-ZIP   Winter Haven, FL 33881	TITLE		<b>IX</b> I DELETE	1			
STREET ADDRESS   S359 TAARDON CITCLE NY   S35 TREET ADDRESS   S4.CITY-S1-ZIP   Winter Haven, FL 33881	NAME					3554 Harbor Circle	
DELETE				1	ADUKESS		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE S1 THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE S1 DELETE S1 STREET ADDRESS CITY-ST-ZIP TITLE S2 NAME S1 STREET ADDRESS CITY-ST-ZIP S4 CITY-ST-ZIP S4 CITY-ST-ZIP S1 STREET ADDRESS CITY-ST-ZIP		WINTER HAVEN FL	DELETE		51- ZIF	□ 0 □ addit.	
STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP   5.1 TITLE   Change   Addition   A						T7D # -	
CITY-ST-ZIP         Winter Haven, FL 33883-7126           TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         CHY-ST-ZIP         5.4 CITY-ST-ZIP         Change         Change         Addition           NAME         DELETE         6.1 TITLE         Change         Change         Addition           NAME         STREET ADDRESS         6.3 STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         CITY-ST-ZIP				I .			
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME				I			
NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP			☐ DELĒTE	_	. 211	Change Addition	
STREET ADDRESS         53 STREET ADDRESS           CTY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CTY-ST-ZIP         6.4 CITY-ST-ZIP			<del></del>				
SACITY-ST-ZIP				8	ADDRESS		
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           DTY-ST-ZIP         6.4 CITY-ST-ZIP				1			
STREET ADDRESS         6.3 STREET ADDRESS           CHY-ST-ZIP         6.4 CHY-ST-ZIP			☐ DELETE			Change Addition	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME			6.2 NAME			
	STREET ADDRESS			6.3 STREET	ADDRESS		
A4 Lab by the label the Information expended with this filling does not qualify for the expension stated in Coction 110 07(2Vi) Florida Statutos I further certify that the	DITY-ST-ZIP						

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 atlachment with an address.