

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90303 016 ****61.25

DOCUMENT # N07141

1. Entity Name

HARBOR PINES OF MANATEE OWNERS ASSOCIATION, INC.



Principal Place of Business

6033 34TH STREET WEST
BRADENTON FL 34210
US

Mailing Address

DELLCOR MANAGEMENT INC
310 PEARL AVE
SARASOTA FL 34243
US

24062143



MOORE CR2E037 (11/03)

2. Principal Place of Business

5766 BRONX AVE

Suite, Apt. #, etc.

STE A

City & State

SARASOTA FL

Zip

34231

Country

USA

3. Mailing Address

5766 BRONX AVE

Suite, Apt. #, etc.

STE A

City & State

SARASOTA FL

Zip

34231

Country

USA

4. FEI Number

52-1462029

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AIMI, DAN D
DELLCOR MANAGEMENT INC
310 PEARL AVE
SARASOTA FL 34243

7. Name and Address of New Registered Agent

Name
MANAGEMENT CONCEPTS OF SARASOTA COUNTY INC

Street Address (P.O. Box Number is Not Acceptable)

5766 BRONX AVE STE A

City

SARASOTA

FL

Zip Code

34231

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

Janice Long, Agent

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when reinstating)

4/1/04

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MASENGALE, RODNEY
6033 34TH ST. W., #8
BRADENTON FL 34210 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GIGLIO, LISA
6053 - 34 ST W #61
BRADENTON FL 34210 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARDACIE, KENNETH
6033 - 34 ST W #92
BRADENTON FL 34210 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CAPOZZI, KATHLEEN
6033 34TH ST. W. #93
BRADENTON FL 34210 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MARNEY, APRIL
6033 34TH ST. W. #24
BRADENTON FL 34210 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
COX, CARL
6033 34TH ST. W. #23
BRADENTON FL 34210 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
FELICITA, JEAN
6033 34TH ST. W. #97
BRADENTON FL 34210 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FAY, WILLIAM
6033 34TH ST. W. #46
BRADENTON FL 34210 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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: *April Mary*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04

Date

941-922-5322

Daytime Phone #