

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90049 022 ****61.25

DOCUMENT # N16863

1. Entity Name

HARBOUR TOWNE VILLAGE HOMEOWNERS' ASSOCIATION, I

Principal Place of Business

Mailing Address

6516 HARBOUR BLVD
 PANAMA CITY BCH. FL 32407

POST OFFICE BOX 18041
 PANAMA CITY BEACH FL 32417-8041
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WESTMORELAND, BABARA
6506 HARBOUR BLVD.
PANAMA CITY BCH. FL 32407

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	P	<input type="checkbox"/> Delete
NAME	MOSLEY, ERNIE	
STREET ADDRESS	6536 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOMIA, NANCY	
STREET ADDRESS	6548 HARBOUR BLVD.	
CITY-ST-ZIP	PANAMA CITY FL 32407	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SAMMON, PATRICK	
STREET ADDRESS	1311 BARBOUR WAY	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCGEHEE, TONY	
STREET ADDRESS	6591 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	LENG, MARIAN	
STREET ADDRESS	6589 HARBOUR BLVD.	
CITY-ST-ZIP	PANAMA CITY FL 32407	
TITLE	D	<input type="checkbox"/> Delete
NAME	ATEZ, JOHN M	
STREET ADDRESS	6540 HARBOUR BLVD.	
CITY-ST-ZIP	PANAMA CITY FL 32407	

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAT SAMMON	
STREET ADDRESS	1311 HARBOUR WAY	
CITY-ST-ZIP	PANAMA CITY BCH FL 32407	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARION WALLACE	
STREET ADDRESS	6586 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY BCH FL 32407	
TITLE	SEC/TREAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARBARA WESTMORELAND	
STREET ADDRESS	6506 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CTY BCH FL 32407	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ART SLAATED	
STREET ADDRESS	6527 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY BCH FL 32407	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN McAFFEE	
STREET ADDRESS	6540 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY BCH FL 32407	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JIMMY THORPE	
STREET ADDRESS	6532 HARBOUR BLVD	
CITY-ST-ZIP	PANAMA CITY BCH FL 32407	

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: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-00

Date

850-233-9499

Daytime Phone #

CR2E037 (9/99)