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NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # N31551 (7)

1. Corporation Name

CORAL POINTE AT HARBOURSIDE OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3001 EXECUTIVE DR SUITE 260 CLEARWATER FL 34622	3001 EXECUTIVE DR SUITE 260 CLEARWATER FL 34622-3389

3. Date Incorporated or Qualified: 04/06/1989
3a. Date of Last Report: 04/19/1996
4. FEI Number: 59-2953582 ☐ 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

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

9. Name and Address of Current Registered Agent

CONDOMINIUM ASSOCIATES
MCNEAL, RAND E , PRESIDENT
3001 EXECUTIVE DR
SUITE 260
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name: CONDOMINIUM ASSOCIATES
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: Condominium Associates By Craig D. Caldwell Vice Pres. CRAIG D. CALDWELL VICE PRES. — DATE: 4-3-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS / **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

	12. Officers and Directors		13. Additions/Changes
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SULLIVAN, DAVID	1.2 NAME	
STREET ADDRESS	8021 SAILBOAT KEY BLVD, D-104	1.3 STREET ADDRESS	
CITY-ST-ZIP	SO. PASADENA FL 33707	1.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HERZBERG, NORBERT	2.2 NAME	
STREET ADDRESS	8020 SAILBOAT KEY BLVD, #C-401	2.3 STREET ADDRESS	
CITY-ST-ZIP	SO. PASADENA FL 33707	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GERONIC ELIZABETH	3.2 NAME	
STREET ADDRESS	8000 SAILBOAT KEY BLVD, #A306	3.3 STREET ADDRESS	
CITY-ST-ZIP	SO. PASADENA FL 33707	3.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	YATES ISAAC	4.2 NAME	
STREET ADDRESS	8000 SAILBOAT KEY BLVD.,#C301	4.3 STREET ADDRESS	
CITY-ST-ZIP	SO. PASADENA FL 33707	4.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	TERESTENYI, DANIEL	5.2 NAME	
STREET ADDRESS	8001 SAILBOAT KEY BLVD, #B-101	5.3 STREET ADDRESS	
CITY-ST-ZIP	SO. PASADENA FL 33707	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E037 (9/96)

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: Daniel Terestenyi, Treasurer — 4-3-97 — (813) 573-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0067487