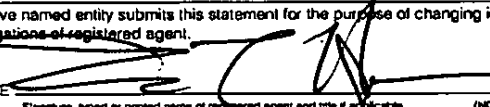
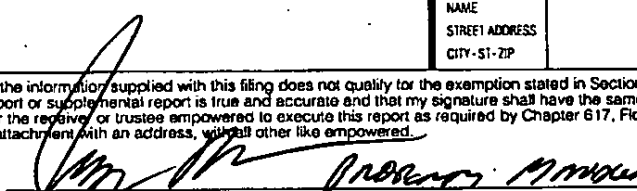


FILED
Mar 31, 2005 8:00 am
Secretary of State

02-18-2005 90059 007 ****61.25

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N35330			
1. Entity Name HARBORVIEW AT FISHER ISLAND CONMDOMINIUM ASSOCIATION, INC.			
Principal Place of Business ONE FISHER ISLAND DRIVE ONE FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 US		Mailing Address ONE FISHER ISLAND DRIVE ONE FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0158755		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DRUBNER, SHARON 4711 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109		7. Name and Address of New Registered Agent Name Mike Hyman Street Address (P.O. Box Number is Not Acceptable) 150 West Flagler St 27th Fl City Miami FL 33130	
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  DATE 3/25/05 (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2005		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, VINCENT 4521 FISHER ISLAND DRIVE FISHER ISLAND, FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAI, ANTHONY 4512 FISHER ISLAND DRIVE FISHER ISLAND FL 33109 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DRUBNER, SHARON 331 SOUTH STREET MIDDLEBURY, CT ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHWARTZ, JEEZY 4712 FISHER ISLAND DRIVE FISHER ISLAND FL 33109 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAI, ANTHONY 4512 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARSON JUDITH 930 FIFTH AVENUE, PHA New York, NY 10021 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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, without other like empowered.			
SIGNATURE: 		Date 3/25/05 305-532-3144	

Harborview
Condominium Resident
03/24/05