

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90044 011 ****61.25

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 - No P.O. Box #	3. Mailing Address clo the Bottom Line 7501 Brigantine Lane Parkland, FL 33067 US
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

40041026



02192008 Chg-NP CR2E037 (12/06)

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 HYMAN, MIKE 150 WEST FLAGLER ST 27TH FLOOR MIAMI, FL 33130	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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. I am familiar with, and accept the obligations of registered agent.

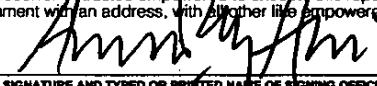
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	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	PD HAL, ANTHONY 4512 FISHER ISLAND DR FISHER ISLAND, FL 33109 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHWARTZ, JERRY 4712 FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHWARTZ, JERRY 4712 FISHER ISLAND DR FISHER ISLAND, FL 33109 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VOTING MEMBER FOR FICA SCHWARTZ, JERRY 4712 FISHER ISLAND DR FISHER ISLAND, FL 33109 ☐ 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	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 exemptions contained in Chapter 119, 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:  **2-18-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #