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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

KLOMAN, MARY J

SARASOTA FL

7867 S. HOLIDAY DRIVE

TITLE

NAME

N95000003737

HOLIDAY HARBOR HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address POST OFFICE BOX 36804 1734 OUESTAR LANE SARASOTA FL 34231-5329 SARASOTA FL 34231-0804 3. Date Incorporated or Qualified 08/04/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 26 1734 QUESTAR LANG 65-0600455 21 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing SARASOTA г Trust Fund Contribution 23 Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 34231-5376 25 20 34231-532630 Yes 🗌 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LOBECK, DANIEL J ESQUIRE 82 Street Address (P.O. Box Number is Not Acceptable) 2063 MAIN STREET 83 SUITE 101 SARASOTA FL 34231 84 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 Signature, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. PD DELETE Change Addition TITLE 1.1 TITLE STEPEK, JEFFREY 1.2 NAME NAME 1734 QUESTAR LANE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-S1-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE DAVIS, DORIS NAME 2.2 NAME 1750 QUESTAR LANE STREET ADDRESS 2.3 STREET ADDRESS Sarasota Fl CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition STEPEK, SUZANNE NAME 3.2 NAME 1734 QUESTAR LANE 3.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Change Addition 4.1 TITLE TITLE D NAME Myette, Margaret 4. 2 NAME 1819 TOWHEE LANE SARASOTA, FL 34231 STREET ADDRESS 1821 TOWHEE LANE 4.3 STREET ADDRESS SARASOTA FL 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE TITLE DC: 5.1 TITLE Change Addition PADAR, STEPHEN NAME 5.2 NAME 1800 TOWHEE LANE 5.3 STREET ADDRESS STREET ADORESS SARASOTA FL

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.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE: Sugannecon Stepell BURANNE M. STEPEL 2/21/97

(96/6)

Change

Addition

FILED

Mar 05 1997 8:00am

Secretary of State