

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0067231

04-01-2002 90659 040 ****61.25

DOCUMENT # N98000003307

1. Entity Name

HARBOR LIGHTS MOBILE OWNERS' RESORT, INC.

Principal Place of Business

**8618 EAST GOSPEL ISLAND ROAD
LOT 15
INVERNESS FL 34450**

Mailing Address

**8618 EAST GOSPEL ISLAND ROAD
LOT 15
INVERNESS FL 34450**

2. Principal Place of Business

**8618 E. GOSPEL IS. RD.
#15**

3. Mailing Address

**8618 E. GOSPEL IS. RD.
LOT 15**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

INVERNESS FL

City & State

INVERNESS FL

Zip

34450

Country

U.S.A.

Zip

34450

Country

U.S.A.

6. Name and Address of Current Registered Agent

**RIDGELY, SHARON K
8618 EAST GOSPEL ISLAND ROAD
LOT 33
INVERNESS FL 34450**

7. Name and Address of New Registered Agent

Name

**AGENT:
DENTON, MARGARET
8618 E. GOSPEL ISLAND RD. #20
INVERNESS, FL 34450**

Street

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

MARGARET M. DENTON
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-21-02

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

TITLE NAME	D RYAN, PATRICK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8618 E GOSPEL ISLAND RD. #56	
CITY-ST-ZIP	INVERNESS FL 34450-2756	
TITLE NAME	D KELLY, JOHN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8618 E GOSPEL ISLAND RD # 55	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE NAME	D WEISTNER, LINDA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	8618 E GOSPEL ISLAND RD # 16	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE NAME	D MEADOWCROFT, KAY	<input type="checkbox"/> Delete
STREET ADDRESS	8618 E GOSPEL RD # 50	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE NAME	D WELCH, DICK	<input type="checkbox"/> Delete
STREET ADDRESS	8618 E GOSPEL ISLAND RD # 36	
CITY-ST-ZIP	INVERNESS FL 34450	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D DIRECTOR HAMMERS, PATRICIA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8618 E. GOSPEL ISLAND RD. #15	
CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE NAME	D DIRECTOR WELCH, DICK	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8618 E. GOSPEL ISLAND RD. #36	
CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE NAME	D DIRECTOR ALBERTSON, FOREST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8618 E. GOSPEL ISLAND RD. #51	
CITY-ST-ZIP	INVERNESS, FL 34450-2756	
TITLE NAME	D DIRECTOR MEADOWCROFT, KAY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8618 E. GOSPEL ISLAND RD. #50	
CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE NAME	D DIRECTOR DICKINSON, HOWARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8618 E. GOSPEL ISLAND RD. #38	
CITY-ST-ZIP	INVERNESS, FL 34450	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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

Patricia A. Hammers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)