

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004941

1. Entity Name

HARBOR PLANTATION CONDOMINIUM OWNERS ASSOCIATION

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90376 012 ****70.00

Principal Place of Business	Mailing Address
724 HWY 98 EAST DESTIN FL 32541	724 HWY 98 EAST DESTIN FL 32541-2506

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. # 201	Suite, Apt. #, etc. # 201
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3416458	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

GRIMSLEY, JAMES W
25 WALTER MARTIN ROAD NE
FT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 STREET ADDRESS CITY-ST-ZIP	PTD HENRY, THOMAS B JR 724 HWY 98 EAST DESTIN FL 32541 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HENRY, SUSAN J 724 HWY 98 EAST DESTIN FL 32541 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HENRY, TODD R 724 HWY 98 EAST DESTIN FL 32541 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 Unit 101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Unit 101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4063 Burning Tree Drive Destin, FL 32541
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 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 THOMAS B. HENRY, JR 4-28-2000 (850) 654-4818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)