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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                             |                                                                                                                                                                                         |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CORPORATION<br>ANNUAL REPORT<br><b>1995</b> | <br>FLORIDA DEPARTMENT OF STATE<br>Sandra B. Northam<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                          |
|--------------------------------------------------------------------------|
| DOCUMENT # <b>757616</b> (8)                                             |
| 1. Corporation Name<br><b>HARBOR GREEN CONDOMINIUM ASSOCIATION, INC.</b> |

|                                                                                                   |                                                                       |
|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| Principal Place of Business<br><b>2775 N WICKHAM RD.<br/>NO 301<br/>MELBOURNE FL 32935<br/>US</b> | Mailing Address<br><b>P.O. BOX 410071<br/>MELBOURNE FL 32941-0071</b> |
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| 2. Principal Place of Business<br>21 <b>2775 N. Wickham RD</b> | 2a. Mailing Address<br>26 <b>Suite, Apt. #, etc.<br/>No. 404</b> |
| City & State<br>23 <b>Melbourne, FL</b>                        | City & State<br>28 <b>Melbourne, FL</b>                          |
| Zip<br>24 <b>32935</b>                                         | Country<br>25 <b>USA</b>                                         |

|                                                                                                                                                                |                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| DO NOT WRITE IN THIS SPACE                                                                                                                                     |                                              |
| 3. Date Incorporated or Qualified<br><b>04/17/1981</b>                                                                                                         | 3a. Date of Last Report<br><b>02/25/1994</b> |
| 4. FEI Number<br><b>59-2182572</b>                                                                                                                             | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                      | <b>\$8.75 Additional Fee Required</b>        |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                             | <b>\$5.00 May Be Added to Fees</b>           |
| 7. Nonprofit with IRS 501(c)(3)<br>Tax Exempt Status <input type="checkbox"/>                                                                                  | <b>\$68.75 Supplemental Fee Not Required</b> |
| 8. This corporation has liability for intangible tax under S. 100.022,<br>Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                              |

|                                                                                                                                      |  |
|--------------------------------------------------------------------------------------------------------------------------------------|--|
| 9. Name and Address of Current Registered Agent<br><b>GEORGE, ALICE B.<br/>2775 N WICKHAM RD.-<br/>NO 301<br/>MELBOURNE FL 32935</b> |  |
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| 10. Name and Address of New Registered Agent<br>81 Name<br><b>Norbert E. Hellmann</b><br>82 Street Address (P.O. Box Number is Not Acceptable)<br><b>2775 N. Wickham RD</b><br>83 <b>No. 404</b><br>84 City<br><b>Melbourne</b> <b>FL</b> 85 Zip Code<br><b>32935</b> |  |
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Norbert E. Hellmann **Norbert E. Hellmann** **3/ /95**  
(Signature, typed or printed name of registered agent and filer if application) (NOTE: Registered Agent signature required when reappointing) DATE

| 12. OFFICERS AND DIRECTORS                         |                                                                                 |
|----------------------------------------------------|---------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>PD<br/>-GEORGE, ALICE B.<br/>-2775 N WICKHAM RD #301-<br/>-MELBOURNE FL-</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>SD<br/>GEIGER, JUNE G.<br/>2775 N WICKHAM RD #204<br/>MELBOURNE FL</b>       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>D<br/>BROWN, WALLY<br/>2775 N WICKHAM RD #406<br/>MELBOURNE FL</b>           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>TD<br/>PETERSEN, BILL<br/>2775 N WICKHAM RD #303<br/>MELBOURNE FL</b>        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>VD<br/>ROHMANN, VIRGINIA<br/>2775 N WICKHAM RD, #405<br/>MELBOURNE FL-</b>   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                                 |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12              |                                                                                                                                                                       |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY - ST - ZIP | <b>PD<br/>Norbert E. Hellman<br/>2775 N. Wickham RD, No. 404<br/>Melbourne, FL 32935</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                     |
| 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                     |
| 4.1 TITLE<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                     |
| 5.1 TITLE<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY - ST - ZIP | <b>VD<br/>Helen Dertinger<br/>2775 N. Wickham RD, No. 106<br/>Melbourne, FL 32935</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition    |
| 6.1 TITLE<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                     |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: Norbert E. Hellmann **Norbert E. Hellmann, President 4/ /95 (407) 259-8861**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number