

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 769960 (6)

1. Corporation Name

HARBOR HILLS-LARGO PROPERTY OWNERS' ASSOCIATION,  
INCORPORATED

Principal Place of Business

3884 ANGLERS LANE  
LARGO FL 34644

Mailing Address

3884 ANGLERS LANE  
LARGO FL 34644



3. Date Incorporated or Qualified  
08/23/1983

3a. Date of Last Report  
04/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

GIBSON, MARTHA J.  
3884 ANGLERS LANE  
LARGO FL 34644

4. FEI Number  
59-2364847

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TD  
GIBSON, MARTHA J  
3884 ANGLERS LANE  
LARGO, FLORIDA 00000

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
GLASER, JAMES W  
4071 CHURCH CREEK POINT  
LARGO, FLORIDA 00000

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
NELSON, ROY  
4089 CHURCH CREEK PT  
LARGO, FLORIDA 00000

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DVP  
WRIGHT, TOM  
3880 ANGLERS LANE  
LARGO FL

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
GERTZEN, CONNIE  
3884 ANGLERS LN  
LARGO FL

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DELETE

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
Change  
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 119.07(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:

*Martha J. Gibson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-18-94

Date

(813)  
584-6283

Daytime Phone #

CR2E037 (12/95)