FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N25265

(2)

HARBOR WOODS OF TARPON SPRINGS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business Mailing Address					T TO BETTY OF THE TOTAL DITTO THE ONLY DISTONDED THE STATE OF THE STAT			
P.O. BOX 1961 P.O. BOX 1961						Date Incorporated or Qualified		
PALM HA	IRBOR FL 34682	PAI	PALM HARBOR FL 34682			03/08/1988		
US		US	ı			4. FEI Number	Applied For	
						59-2966297	Not Applicable	
2. Principal Place of Business			2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional	
21			26 Suite Ant # ete				Fee Required	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be	
City & State			City & State			Trust Fund Contribution 7. Is this nonprofit corporation a homeow	Added to Fees	
23		28				Yes No		
Zip .	Cou	untry	Zip Country		8. This corporation owes or has paid the current year Intangible			
24	25	29	30	30		Personal Property Tax due June 30. Yes No		
ļ	9. Name and Ad	dress of Current Regist	lered Agent	81	Name	10. Name and Address of New Registers	ed Agent	
DV.	M AM			[8]	Name			
RYAN, SUE				82	Street Add	et Address (P.O. Box Number is Not Acceptable)		
4896 HARBOR WOODS DR PALM HARBOR FL 34683				83				
r A	M HANDUN FL 34003						· =	
	·			84	City	F	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 registere								
omici ager	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.							
i	SIGNATURE							
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature								
12. TITLE		OFFICERS AND DIREC	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12 Change Addition	
NAME	SCHWARTS, TO	M	- During	1.2 NAME		Director	Change - Addition	
STREET ADDRESS 4804 HARBOR WOODS DR				1.3 STREET	4	Sa humanda Ta on		
CITY-ST-ZIP PALM HARBOR FL				1.4 CITY-SI	/UDITEO A	4864 Harber Weeds Dr	202	
TITLE	8		DELETE	2.1 TITLE		Seay. Direct	Change Addition	
NAME	MORGAN, GEORGE			2.2 NAME		_ ·	#	
STREET ADD	44.5		2.3 STREET ADDRESS		ADDRESS	4- SAMe Margan	but woods Drive	
CITY-ST-ZIF		<u> FL</u>	T	2. 4 CITY-S	iT-ZIP	PAIM A	HT 107 FL 2 794.2	
TITLE	TD OUT			3.1 TITLE		Tremover	☐ Change ☐ Addition	
NAME	RYAN, SUE	WAARA RB		3.2 NAME		- Same Rynn, 5	ud shade De	
STREET ADD	***************************************			3.3 STREET	ADDRESS	7 3477 2 487 M	MISSI WOODS DI.	
CITY-ST-ZII TITLE	B FLAM HARDON	i FL		3.4. CITY-S 4.1 TITLE	IT-ZIP	I SAME Ryan, 5	Change Addition	
NAME	WIGOTSKY-DA	an Andrea	A a sala	4.1 THE		ANNA BANGLEY 4961 HARber Woods Dr	Origings Audition	
STREET ADD	****			4.3 STREET		Palm Harbor, FL 340		
CITY-ST-ZIF				4.4 CITY-ST		President	9 T 2	
TITLE	D			5.1 TITLE	4."	Director	Change Addition	
NAME	NEWMAN, MAF	#E		5.2 NAME	7	Tonu Sconza.		
STREET ADDRESS 4583 HARBOR WOODS DR				5.3 STREET	ADDRESS 4	4890 Harbor Woods Ur	•	
CITY-ST-ZIF	PALM HARBOR	FL 34683		5.4 CITY - ST	r-zip	PAIM HArbor, FL 34	682	
TITLE			☐ DELETE	6.1 TITLE		•	☐ Change ☐ Addition	
NAME				6.2 NAME				
CTOFFT 4DOI	oree I				4000000			

64 CITY-ST-ZIP

14. 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 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 op an attachment with an address.

Marine Villand Page

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FILED

Jul 08 1998 8:00am

Secretary of State

R2E037 (10/97)