

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Barbara B. Matthews

Secretary of State

DOCUMENT # 638805

(2)

HARBOUR ISLAND INC.

Principal Office (Mailing Address)		Mailing Address		Date of Information (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (30)	
424 KNIGHTS RUN AVE TAMPA FL 33602 US		300 BENEFICIAL CENTER PEAPACK NJ 07977 US		09/27/1979	
2. Principal Office (Mailing Address)		28. Mailing Address		38. Date of Last Report	
21		26		05/01/1994	
State: App. R. 10		State: App. R. 10		4. File Number	
22		27		51-0256917	
City & State		City & State		5. Certificate of Status Desired	
23		28		8.75 Additional Fee Required	
24		25		6. Election Campaign Financing Trust Fund Contribution	
29		30		5.00 May Be Added to Fees	
25		29		6. This corporation has liability for intangible tax under 1995 Florida Statutes	
29		30		Yes ☒ No ☐	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
KERR, DAVID C.G. 211 EAST MADISON STREET, 23RD FLOOR TAMPA FL 33602		81 Name	
		82 Street Address (P.O. Box Number is Not Accepted)	
		83	
		84 City	
		FL 85 Zip Code	

I, Pursuant to the provisions of Sections 607.050, and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office & 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 Sections 607.050, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	D CASPERSEN, FINN M W 301 N. WALNUT ST. WILMINGTON DE	1. NAME	Vice President James Tarbet 424 Knights Run Ave. Tampa, FL 33602
STREET ADDRESS		2. NAME	Secretary Matthew J. Broas 200 Beneficial Center Peapack, NJ 07977
CITY & STATE		3. NAME	ASSISTANT VICE PRESIDENT SCOTT K. RHINEHART 300 BENEFICIAL CENTER PEAPACK, NJ 07977
NAME	PD MCGOUGH, THOMAS P. 301 N. WALNUT ST. WILMINGTON DE	4. NAME	
STREET ADDRESS		5. NAME	
CITY & STATE		6. NAME	
NAME	VAS COOK, MARIA F 300 BENEFICIAL CENTER PEAPACK NJ	7. NAME	
STREET ADDRESS		8. NAME	
CITY & STATE		9. NAME	
NAME	D CHARLES H. WATTS 301 N. WALNUT ST. WILMINGTON DE	10. NAME	
STREET ADDRESS		11. NAME	
CITY & STATE		12. NAME	
NAME	D FARRIS, DAVID J. 301 N. WALNUT ST. WILMINGTON NJ	13. NAME	
STREET ADDRESS		14. NAME	
CITY & STATE		15. NAME	
NAME	D HILLIER, J. ROBERT 77 ALEXANDER ROAD PRINCETON NJ	16. NAME	
STREET ADDRESS		17. NAME	
CITY & STATE		18. NAME	

I, I hereby certify that the information supplied with this filing is voluntarily furnished and that it qualifies for the exemption stated in Section 110.01(1)(b), Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if my name appears on the report or supplemental report as required by Chapter 607, Florida Statutes, and that my name appears on the report or supplemental report as required by Chapter 607, Florida Statutes.

SIGNATURE: *S.K. Rhinehart* S.K. RHINEHART, AVP 4/24/95 (908) 781-3381
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR