

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 638805

1. Entity Name

HARBOUR ISLAND INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90045 049 ***150.00

Principal Place of Business 2700 SANDERS RD ATTN: TAX DEPT PROSPECT HEIGHTS IL 60070 US	Mailing Address 300 BENEFICIAL CENTER PEAPACK NJ 07977 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address 2700 SANDERS RD.		4. FEI Number 51-0256917		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. TAX DEPT. 2S					
City & State		City & State PROSPECT HEIGHTS, IL					
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
		60070					

6. Name and Address of Current Registered Agent KERR, DAVID C.G. 211 EAST MADISON STREET, 23RD FLOOR TAMPA FL 33602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GILMER, G D 2700 SANDERS RD PROSPECT HEIGHTS IL 60070	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHED SCHEDULE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BTENKE, S W 2700 SANDERS RD PROSPECT HEIGHTS IL 60070	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOZAR, S A 2700 SANDERS RD PROSPECT HEIGHTS IL 60070	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELUCA, M A 2700 SANDERS RD PROSPECT HEIGHTS IL 60070	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAY, P R 2700 SANDERS RD PROSPECT HEIGHTS IL 60070	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Joseph M. Angelo JOSEPH M. ANGELO 2/3/2000 (817) 504-4058
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)