## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

HARBOUR INLET ASSOCIATION, INC.  Principal Place of Business PO, BOX 6538 FT LAUDERDALE FL 33316  2. Maining Address PO, BOX 6538 FT LAUDERDALE FL 33316  2. Maining Address 2. Maining Address PO, BOX 6538 FT LAUDERDALE FL 33316  2. Principal Place of Business Suss. April 4, etc. Suss.	DOCUI	MENT # 70176	52 (7)			
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2.   Principal Place of Business				3316		
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Suite, Apt. #, etc.    Suite, Apt. #, etc.   27	·	ace of Business	— ·			<del> </del>
City & State   20   20   20   20   20   20   20   2	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
29 Country Zp Country Zp 30 Country Xp 30 Co		<del></del> e	<del></del>		6 Flection Campaign Financing	<del></del>
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COLE, BILL 1942 SE 24TH AVE. FT. LAUDERDALE FL 33316  11. Pursuant to the provisions of Sections E12,0502 and 617,1508, Fordis Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept of performing very and accept of performing to the purpose of changing its replaced of or egistered performing very and accept performing of 17,0508, Provide Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and the purpose of changing its replaced of or egistered performent is registered agent and the purpose of changing its replaced of or egistered performent is registered agent. I am formation was and accept performent as registered agent. I am formation was and accept performent as registered agent. I am formation was and accept the appointment as registered agent. I am formation was and accept the appointment as registered agent. I am formation was and accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accept the appointment as registered agent. I am formation was accepted to the receiver of a decidence of the purpose of changing its replaced of directors. I hereby accept the appointment as registered agent. I am formation was accepted to the purpose of changing its replaced of directors. I hereby accept the appointment as registered agent. I am formation was accepted the receiver agent. I am formation was accepted to the purpose of changing its replaced of registered agent. I am formation was accepted to the purpose of changing its replaced of the purpose accept the appointment as registered agent. I am formation was accepted and accepted agent. I am formation was accepted agen	<del>-</del>	Country	Zip	<b>L</b>	8. This corporation has liability for intang	····
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COLE, BILL 1942 SE 24TH AVE. FT. LAUDERDALE FL 33316  28		9. Name and Address of Curr	ent Registered Agent	Od Name	10. Name and Address of New Regist	ered Agent
11. Fursuant to the provisions of Sections 817.0202 and 617.1508. Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing as registered or or registered agent, or both, in the sing of Fords, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and an advanced private rame of registered agent, or both, in the sing of Fords, Such change was putnorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and an advanced private rame of registered agent are for a registered agent and a registe	COLE D	H( )		Name	LOMAENGLI .	Richard
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SIGNATURE    Signam, based or private norm and private active act	or register	ed agent, or both, in the State of Flo	rida Such change was authoriz	zed by the corporation's boar	rd of directors. I hereby accept the appointment	or changing its registered office ent as registered agent. I am
12		to, and acceptate obligations of, Se	ction 617.0503, Florida/Statutes	5.		Al. be
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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	14. I do hereb	y certify that the information supplied	with this filing is voluntarily furn	ished and does not qualify for	or the exemption stated in Section 119 07/39/	k). Florida Statutes I further