## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701

(7)

Mailing Address

HARBOUR INLET ASSOCIATION, INC.

FILED
Jan 29 1997 8:00am
Secretary of State

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P.O. BOX 6538 FT LAUDERDALS	E FL 33316	P.O. BOX 6538 FT LAUDERDALE FL 33316-00	P.O. BOX 6538 FT LAUDERDALE FL 33316-0060				
					3. Date Incorporated or Qualified 12/05/1960	3a. Date of Last Report 05/01/1996	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-1164411	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be		
23	28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	/	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	1 1	10		Florida Statutes		
	9. Name and Address of Cu	rrent Registered Agent		T	10. Name and Address of New Re	gistered Agent	
			81	Name			
ROMAGN	NOLI, RICHARD		82	Street Ad	dress (P.O. Box Number is Not Acceptab	ie)	
2001 SE	24 AVE.						
FT. LAUC	DERDALE FL 33316		83				
			84	City		85 Zip Code	
			1				
11. Pursuant i	to the provisions of Sections 617	.0502 and 617, 1508, Florida Statutes	the abou	e-named co	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered	
agent. I a	m familiar with, and accept the c	obligations of, Section 617.0503, Flori	da Statute	S.	ration's board of directors, thoroby accept	n the appointment de regioneres	
SIGNATURE							
	Signature, typed or printed name of registers			ent signature rec	quired when reinstating)	DATE	
12.		S AND DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFIC	Change Addition	
TITLE	PD	☐ DELETE	1.1 TITLE			Change C Addition	
NAME	ROMAGNOLI, RICHARD		1.2 NAME				
STREET ADDRESS	2001 SE 24 AVE			T ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL	Decemen	1.4 CITY -	ST-ZIP		Change Addition	
TITLE	VD	☐ DELETE	2.1 TITLE			Change Changing	
NAME	STERLING, STAN		2.2 NAME				
STREET ADDRESS	1835 S. OCEAN DR.			T ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL	DELETE	2. 4 CITY	ST-ZIP		Change Addition	
TITLE	SO HADT BADDADA	C DETELE	3.1 TITLE			Onango Addition	
NAME	HART, BARBARA		3.2 NAME				
STREET ADDRESS	2524 BARBARA DR.			T ADDRESS			
CITY-\$T-ZIP	FT. LAUDERDALE FL	DELETE	3.4. CITY	ST-ZIP		Change Addition	
TITLE	TD DENIE					C orange C Madrida	
NAME	GUENTHER, BEN L		4 2 NAME	1			
STREET ADDRESS	2400 SE 21 ST			T ADDRESS			
CITY-\$T-ZIP	FT. LAUDERDALE FL	DELETE	4.4 CITY-	S1-ZIP		Change Addition	
TITLE		רין טנונונ	5.1 TITLE			E crange E vanitur	
NAME ATTICKT ADDRESS			5.2 NAME	T *DDDTG0			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 CITY -	SI-ZIP		Change Addition	
TITLE		☐ DETEIE	6.1 TITLE			C. Onange C. Addition	
NAME			6.2 NAME	1			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		D. C. C.	6.4 CITY-		tod in Section 110.07/9/(i) Elevide Statute	a 1 f. who a coulify the state	

4. I do 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 on an attachment with an address.

CIONATURE CAS DENIL FUENTHEY 1/20/97 954764 0470