## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

## FILED DOCUMENT # 702164 May 17, 2000 8:00 am 1. Entity Name Secretary of State HARBOUR HEIGHTS CIVIC ASSOCIATION, INC. 05-17-2000 90984 048 \*\*\*\*70.00 Principal Place of Business Mailing Address 2530 HARBOR DRIVE 2530 HARBOR DRIVE HARBOUR HEIGHTS FL 33983-3427 HARBOUR HEIGHTS FL 33983-3155 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FFI Number City & State 06-0154551 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Staud nyen Street Address (P.O. Box Number is Not Acceptable) SEVIGNY, ARTHUR 27385 VOYAGEUR DR. HARBOUR HEIGHTS-EL 33983 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the state of Florida 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PAST President Addition TITI F ☐ Chance ☐ Delete MCCLELLAND, BARBARA NAME NAME STREET ADDRESS STREET ADDRESS 3091 CATALINA CT CITY-ST-ZIP HARBOUR HEIGHTS FL 339*8*3 Addition Change ☐ Delete TITLE TITLE NAME NAME BENINATI, DOMINIC STREET ADDRESS STREET ADDRESS 3018 PEACE RIVER DR Peace River PA CITY-ST-ZIP CITY-ST-ZIE HARBOUR HEIGHTS FL Addition VΡ ☐ Delete TITLE TITLE NAME HAYES, JOAN NAME e ook 8 say ma STREET ADDRESS STREET ADDRESS 3022 BROADPOINT DR CITY-ST-ZIP CITY-ST-ZIP HARBOUR HEIGHTS FL 33963 FPRESIDENT STAUDMYER, MELBOURNE Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 3145 PEACE RIVER DR CITY-ST-ZIP CITY-ST-7IP HARBOUR HEIGHTS FL 33983 Delete ☐ Change ☐ Addition TITLE NAME SEVIGNY, ARTHUR NAME STREET ADDRESS STREET ADDRESS 27385 VOYAGEUR DR. CITY-ST-ZIP CITY-ST-ZIP HARBOUR HEIGHTS FL ☐ Change Delete ☐ Addition D TITLE NAME IRWIN, JACK NAME STREET ADDRESS STREET ADDRESS 3608 PEACE RIVER DR CITY-ST-ZIP CITY-ST-ZIP HARBOUR HEIGHTS FL 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if