2002 UNIFORM BUSINESS REPORT (UBR)

Aug 05, 2002 8:00 am Secretary of State **DOCUMENT # 702164** 08-05-2002 90009 002 ****61.25 1. Entity Name HARBOUR HEIGHTS CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address 2530 HARBOR DRIVE 2530 HARBOR DRIVE HARBOUR HEIGHTS FL 33983-3155 HARBOUR HEIGHTS FL 33983-3155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 06-0154551 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KUHN, BETH Street Address (P.O. Box Number is Not Acceptable) 272425 SAN MARCO DR HARBOUR HTS FL 33983 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. min. will be \$236.25. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE □ Delete TID F ☐ Change ☐ Addition NAME : KUHN, BETH NAME STREET ADDRESS 24242 SAN MARCO DR. STREET ADDRESS CITY-ST-ZIP HARBOUR HEIGHT FL 33983 CITY-ST-ZIP Charles Sayre Delete ☐ Change Addition NAME BENINATI, DOMINIC NAME #1248 San marino Dr. STREET ATIONESS 3018 PEACE RIVER DR STREET ADDRESS CITY-ST-ZIP HARBOUR HEIGHTS FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME HAYES, JOAN NAME STREET ADDRESS 3022 BROADPOINT DR STREET ADDRESS CITY-ST-ZIP HARBOUR HEIGHTS FL 33963 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STAUDMYER, MELBOURNE NAME STREET ADDRESS 3145 PEACE RIVER DR STREET ADDRESS CITY-ST-ZIP Harbour Heights FL 33983 CITY-ST-ZIP TITLE Delete TITLE ☐ Change **Addition** WRANGLER, KEN NAME NAME STREET ADDRESS 3577 PEACE RIVER DR. STREET ADDRESS CITY-ST-ZIP HARBOUR HEIGHTS FL 33983 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition COOK, JIM. NAME NAME STREET ADDRESS

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 eath; 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 chapter 617.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

2713 B SAN MARCO DR.

HARBOUR HEIGHTS FL 33983

FILED