2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 24, 2005 8:00 am
Secretary of State
05-24-2005 90121 017 ****61.25

DOCUMENT # 702164

1. Entity Name

HARBOUR HEIGHTS CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2530 HARBOR DRIVE HARBOUR HEIGHTS FL 33983-3155	2200 KINGS HWY, BLDG 3L PMB #1 PORT CHARLOTTE FL 33980-5760

1st MOORE CR2E037 (10/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 06-0154551 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WALLACE, JOHANNE
3400 PEACE RIVER DR
PUNTA GORDA FL 33983

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WALLACE, JOHANNE 3400 PEACE RIVER DR HARBOUR HEIGHT FL 33983	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY JOHN DiPINTO 3416 PEACE RIVER DR. HARBOUR HEIGHTS FL 33983	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WANGLER, KENNETH 3577 PEACE RIVER DR HARBOUR HEIGHTS FL 33983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER PETER GLASSBERG 3372 SULSTONE DR. H.H. FL 33983	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HAYES, JOAN 3022 BROADPOINT DR HARBOUR HEIGHTS FL 33963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MARGRET SCOTT 27321 VOYAGEUR DR HH FL 33993	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STAUDMYER, MELBOURNE 3145 PEACE RIVER DR HARBOUR HEIGHTS FL 33983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR. DAVID BARTLETT 3708 PEACE RIVER DR HH FL 33983	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GRAETTINGER, BARBARA 3480 PEACE RIVER DR HARBOUR HEIGHTS FL 33983	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR MARTY RAY 3700 BALBOA CT HH FL 33983	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARTLETT, DAVID 3708 PEACE RIVER DR HARBOUR HEIGHTS FL 33983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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

SIGNATURE: Kenneth R Wangler 05-14-05 941-629-1084
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #