

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90030 029 *****61.25

0004164

DOCUMENT # 707464

1. Entity Name

HARBOUR EAST ASSOCIATION INC

Principal Place of Business

**700 NE HARBOUR TERR
 #233
 BOCA RATON FL 33431
 US**

Mailing Address

**700 NE HARBOUR TERR
 #233
 BOCA RATON FL 33431
 US**

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

23-7075583

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**RODLER, ADELE
 700 NE HARBOUR TERR
 APT 233
 BOCA RATON FL 33431**

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
 NAME **VEDER, BOB**
 STREET ADDRESS **700 N.E. HARBOUR TERRACE, #131**
 CITY-ST-ZIP **BOCA RATON FL**

TITLE **SD** ☒ Delete
 NAME **ALICE GRIDLEY**
 STREET ADDRESS **788 NE MARINE DR.**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **TD** ☐ Delete
 NAME **RODLER, ADELE**
 STREET ADDRESS **700 NE HARBOUR TERR #233**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **VD** ☒ Delete
 NAME **CUMMINGS, FRAN**
 STREET ADDRESS **711 HARBOUR TER 302**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☒ Delete
 NAME **KUPERMAN, ENID**
 STREET ADDRESS **777 NE MARINE DR**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME **[Signature]**
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
 NAME **CUMMINGS, FRAN**
 STREET ADDRESS **711 HARBOUR TERR 302**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **SD** ☒ Change ☐ Addition
 NAME **Kissel-Weir, KRIS**
 STREET ADDRESS **640 NE 32nd ST.**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **TURNER, JIM**
 STREET ADDRESS **681 NE MARINE DR**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/01 561-392-2987

Date

Daytime Phone #

CR2E037 (10/00)