2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT #727398** 04-26-2004 90539 021 ****61.25 HARBOUR ISLAND ASSOCIATION, INC. Principal Place of Business Mailing Address 1336 WINDSONG RD 1336 WINDSONG RD ORLANDO, FL 32809 US ORLANDO, FL 32809 US 3. Mailing Address 2. Principal Place of Business 1238 Harbour Island Rd 1238 Harbour IS Suite, Apt. #, etc. Suite, Apt. #, etc. 04222004 Chg-NP CR2E037 (10/03) Applied For City & State City & State 4. FEI Number NOT APPLICABLE FZ Not Applicable 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 PANTALEON, NICKIE 1336 WINDSONG RD ORLANDO, FL 32809 8. The above named entity submits this elatement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SEUIER SABIN SIGNATURE Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2004 Added to Fees 10. - OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Deiete TITLE NAME PANTALEON, JOHN NAME sevier Sa 1208 Windsong R 1336 WINDSONG RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32809 CITY-ST-ZIP 3.2809 ☐ Delete TITLE ☐ Change ☐ Addition TITLE SAULS, CLYDE NAME NAME STREET ADDRESS 1527 WINDSONG RD STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32809 CITY-ST-ZIP ☐ Delete THE ☐ Channe ☐ Addition TITLE MCCANLESS, CHARLES NAME NAME STREET ADDRESS 1238 HARBOR ISLAND RD. STREET ADDRESS ORLANDO, FL 32809 CITY-ST-ZIP CITY-ST-ZIP To he Pantaleon 1336 Windsong Rd 328 Delete TITLE Change Addition TITLE CHOTAS, LEE NAME NAME STREET ADDRESS 1205 WINDSONG RD. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32809 CITY-ST-ZIP 809 TITLE ☐ Delete TITS F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZiP 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 ampowered 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 attact/might with an address, with all other like empowered.

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