FILE NOW: FILING FEE AFTER MAY 1 IS $165.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-06/23/95--01078--010
****130.00 ****130.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # 731737 (3)

1. Corporation Name

HARBOR CLUB SOUTH CONDOMINIUM, BUILDING NO. 1, I NC.

Principal Place of Business	Mailing Address
423 SOMBRERO BEACH ROAD MARATHON FLORIDA 33050	423 SOMBRERO BEACH ROAD MARATHON FLORIDA 33050

3. Date Incorporated or Qualified: 01/22/1975
3a. Date of Last Report: 07/06/1994
4. FEI Number: 59-1711930 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
City & State (23)	City & State (28)	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
Zip (24) Country (25)	Zip (29) Country (30)	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DEWHURST, MARY ANN
423 SOMBRERO BEACH RD.
MARATHON FL 33050

10. Name and Address of New Registered Agent

81 Name: BOWERS, GARY E.
82 Street Address (P.O. Box Number is Not Acceptable): 423 SOMBRERO BEACH RD.
83
84 City: MARATHON FL 85 Zip Code: 33050

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

USE THIS ONE

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE: PD	☐ Change ☒ Addition
NAME	DEWHURST, MARY ANN	12 NAME: BOWERS, GARY	
STREET ADDRESS	423 SOMBRERO BEACH RD	13 STREET ADDRESS: 423 SOMBRERO BEACH RD	
CITY-ST-ZIP	MARATHON FL 33050	14 CITY-ST-ZIP: MARATHON, FL 33050	
TITLE	VD	21 TITLE: VD	☒ Change ☐ Addition
NAME	KURSHAN, GERTRUDE	22 NAME: HOVLAND, MARY ANN	
STREET ADDRESS	423 SOMBRERO BEACH RD	23 STREET ADDRESS: 423 SOMBRERO BEACH RD.	
CITY-ST-ZIP	MARATHON FL 33050	24 CITY-ST-ZIP: MARATHON, FL 33050	
TITLE	TD	31 TITLE: [redacted]	☐ Change ☐ Addition
NAME	MARTIN, FAITH	32 NAME: [redacted]	
STREET ADDRESS	423 SOMBRERO BEACH RD	33 STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL 33050	34 CITY-ST-ZIP	
TITLE	SD	41 TITLE: D	☒ Change ☐ Addition
NAME	BOOM, SEDONIA	42 NAME: STACEY, DAVE	
STREET ADDRESS	423 SOMBRERO BEACH RD	43 STREET ADDRESS: 423 SOMBRERO BEACH RD	
CITY-ST-ZIP	MARATHON FL 33050	44 CITY-ST-ZIP: MARATHON, FL 33050	
TITLE	[redacted]	51 TITLE: D	☐ Change ☒ Addition
NAME	BOWERS, MARGARET	52 NAME: HEISS, BEVERLY	
STREET ADDRESS	[redacted] BEACH RD	53 STREET ADDRESS: 423 SOMBRERO BEACH RD.	
CITY-ST-ZIP	MARATHON, FL 33050	54 CITY-ST-ZIP: MARATHON, FL 33050	
TITLE	AD	61 TITLE: AD	☒ Change ☐ Addition
NAME	DAVE, STACEY	62 NAME: KURSHAN, GERTRUDE	
STREET ADDRESS	423 SOMBRERO BEACH RD	63 STREET ADDRESS: 423 SOMBRERO BEACH RD.	
CITY-ST-ZIP	MARATHON FL 33050	64 CITY-ST-ZIP: MARATHON, FL. 33050	

DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 4/14/95 305-743-2417
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0010703