FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT #**

121

FILED Mar 28 1997 8:00am Secretary of State

HARBOR CLUB SOUTH CONDOMINIUM, BUILDING NO. 1, I						
Principal Place of Business Mailing Address 423 SOMBRERO BEACH ROAD 423 SOMBRERO BEACH RIMARATHON FLORIDA 33050 MARATHON FLORIDA 33050				(14811 1899 1191 1191 1199 1199	(100111 10000 1101 10011 1000 1101 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001 1001	
MARCATAGNETO	UNION SOCIO	WARATION I LOBINA		3. Date Incorporated or Qualified 01/22/1975	3a. Date of Last Report 04/29/1996	
	Principal Place of Business 2a. Mailing Address			4. FEI Number 59-1711930	Applied For	
	Suite, Apt. #, etc. Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for		
24	9. Name and Address of Curr	29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	30	Florida Statutes 10. Name and Address of New R	Yes No	
	5. Italiio and Addiess of Cult	ent volisteren våant	81 Name		adistolan Adalır	
	S, GARY E			Address (P.O. Box Number is Not Accepta	able)	
423 SOMBRERO BEACH RD. MARATHON FL 33050			83			
			84 City		FL 85 Zip Code	
SIGNATURE . 111. 111.E NAME STREET ADDRESS	Signature, typidd or printed name of registered OFFICERS /	agent and title if applicable (N NDD DIRECTORS DELETE 3 Amn Howland	13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS	corporation submits this statement for the poration's board of directors. I hereby access required when reinstating) ADDITIONS/CHANGES TO OFFI TREAS Ochbie A. Baker 423 Somban Beh R4	DATE	
CITY - ST - 7IP	MARATHON FL 33050		1.4 CITY - ST - ZIP	marathan 26 33050		
TITLE NAME STREET ADDRESS	VP HOVLAND, HAL 423 SOMBRERO BEACH R	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	Sec. Michael Stead 423 Sombrens Bol Rd	☐ Change ☐ Addition	
CITY-\$1-ZIP TITLE	MARATHON FL D	DELETE	2. 4 CITY+ST-ZIP 3.1 TITLE	marathm-22 33000	Change Addition	
name Street address City-St-Zip	STACEY, ANNE 423 SOMBRERO BEACH R MARATHON FL	D	3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP			
TITLE NAME	D HEISS, BEVERLY	☐ DELETE	4.1 TITLE 4.2 NAME		Change Addition	
STREET ADDRESS CITY-S1-ZIP	423 SOMBRERO BEACH R MARATHON FL 33050	D	4.3 STREET ADORESS			
TITLE NAME STHEET ADDRESS	KURSHAW, GERTRUDE 423 SOMBRERO BEACH R	D DELETE	5.1 TITLE 5.2 NAME 6.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP TITLE NAME STREE I ADDRESS	MARATHON FL 33050	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		☐ Change ☐ Addition	
CHTY-ST-ZIP	entify that the information acceptance	diad with this filing done not gu	6.4 CITY - ST - ZIP	stated in Section 119 07/3)(i) Florida Statut	toe I further partify that the	

reconcretely certify that the information supplied with this filling 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 suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.