FILE NOW: FILING FEE IS \$61.25

NONPROFIT . **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthem

Secretary of State **DIVISION OF CORPORATIONS**

1998 **DOCUMENT** #

(3)

HARBOR CLUB SOUTH CONDOMINIUM, BUILDING NO. 1, 1

NC.

FILED May 01 1998 8:00am Secretary of State



					[# 218] 6 16] 3 16(216] 186(
Principal Plac	e of Business	Mailing Address		0 10001C 00030 (110) 3101C 30000 (11(1) 1000 0100) (110	II MIDII DINII DINII DINII DINII
423 SOMBRERO BEACH ROAD MARATHON FLORIDA 33050		423 SOMBRERO BEACH		3. Date Incorporated or Qualified	
MAKATHON FLO	OHIDA 33050	MARATHON FLORIDA 3	XU5 U	01/22/1975	
				4. FEI Number	Applied For
				59-1711930	Not Applicabl
	Place of Business	20. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
1		26			Fee Required
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	Added to Fees
23	lo	28		7. Is this nonprofit corporation a homeowner Yes	S association? No
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25	29	30		Yes I Z No
	9. Name and Address of Curren			10. Name and Address of New Registered	
			81 Name C	St. Mil. of	
SOWER!	9:-GARYE		B2 Street Add	Stead, Michael	
423 SOMBRERO BEACH RD.			Street Add	dress (P.O. Box Number is Not Acceptable) 423 Sombre ro Beach	DN #4
MARATHON FL 33050			83	Juliania	
11168 1144					T-1 5 5 5
	•		84 City	Marathon FL	85 Zip Code 33050
11. Pursuant	to the provisions of Sections 617.050;	2 and 617.1508, Florida Sta	tutes, the above-named cor.	poration submits this statement for the purpose of	changing its registere
office or r	registered agent, or both, in the State	of Florida Such change wa	as authorized by the corpora	poration submits this statement for the purpose of ation's board of directors. I hereby accept the app	ointment as registered
	am laminar with And accept the deliver			5-7	4-38
SIGNATURE ,	Signature, typed or printed name of registered age:	nt and title if applicable (I	VOTE: Registered Agent signature requi	ired when reinstating) DATE	1 - 0
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	T	∠ DELET E	1.1 TITLE P/C	Fortand, Mary Arm 423 Sombrero Beach Rd	Change Addition
NAME	HOULAND, MARY ANN		1.2 NAME	forland, Mary Ann	#4-
STREET ADDRESS	423 SOMBRERO BEACH RD		1.3 STREET ADDRESS 4	423 Sombrero Beach Ka	0
CITY-ST-ZIP	MARATHON FL.		1.4 CITY-ST-ZiP	Marathoi FI 3305	
TITLE	T	DELETE	2.1 TITLE 1. In Section 2.	•	LOCAL Channe L. L. Addition
NAME	BAKER, DEBBIE A		2.2 NAME	Heiss, Beverly 423 Sombrero Beach Rd.	L D
STREET ADDRESS	423 SOMBRERO BEACH RD.		2.3 STREET ADDRESS	423 Sombrero Beach Kd.	F '/
CITY-ST-ZIP	MARATHON FL		2. 4 CITY-ST-ZIP	Marathon, Fl. 3305	<u> </u>
TITLE	D	DELETE			
NAME	STACEY, ANNE		3.2 NAME	Kunshare, Gertrudt 49.3 Sombrero Beach Rd	# Q·
STREET ADDRESS	423 SOMBRERO BEACH RD		3.3 STREET ADDRESS	423 Sombrero Beach Ky	- 0
CITY-ST-ZIP	MARATHON FL		3.4. CITY-ST-ZIP	Mara 1 non, Fl. 33050	
TITLE	D	DELETE	4.1 TITLE	tend Michael	∠ Change
NAME	HEISS, BEVERLY		4. 2 NAME	123 Sombrers Beach 1	0 J #4
STREET ADDRESS	144 COMPRESS SEASULOS		■ . I ← ₂	123 Somorers wealth!	ND'4 7
DINEEL POPULOS	423 SOMBRERO BEACH RD				
CITY-ST-ZIP	MARATHON FL 33050				
		☑ DELETE	4.4 CITY-ST-ZIP	Marathon, F1.33050	
CITY-ST-ZIP	MARATHON FL 33050	⊠ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	Marathon, Fl. 33050	M Change ☑ Addition
CITY-ST-ZIP TITLE	MARATHON FL 33050	⊠ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4	Marathon, F1.33050 mith, Dolly K23 Sombrero Beach Rd	Change Additio
CITY-\$T-ZIP TITLE NAME STREET ADDRESS	MARATHON FL 33050 VP KURSHAW, GERTRUDE 423 SOMBRERO BEACH RD	⊠ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4	Marathon, F1.33050 mith, Dolly K23 Sombrero Beach Rd	Change Addition
CITY-ST-ZIP THILE NAME	MARATHON FL 33050 VP KURSHAW, GERTRUDE	☑ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	Marathon, F1.33050 mith, Dolly 123 Sombrero Beach Rd Marathon, F1, 33050	Change Addition
CITY-\$T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARATHON FL 33050 VP KURSHAW, GERTRUDE 423 SOMBRERO BEACH RD MARATHON FL S		4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 7	Marathon, F1.33050 mith, Dolly K23 Sombrero Beach Rd Marathon, F1.33050 Stacov, Ann	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MARATHON FL 33050 VP KURSHAW, GERTRUDE 423 SOMBRERO BEACH RD MARATHON FL		4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	Marathon, F1.33050 mith, Dolly 123 Sombrero Beach Rd Marathon, F1, 33050	Change Addition

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 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.