


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2007 8:00 am**  
**Secretary of State**

01-31-2007 90033 047 \*\*\*\*61.25

<b>DOCUMENT # 745122</b>	
1. Entity Name HARBOR VIEW APARTMENTS, A CONDOMINIUM, INC.	

Principal Place of Business 1535 SE 15TH ST # 311 FT LAUDERDALE, FL 33316	Mailing Address 1322 SE 17TH ST FORT LAUDERDALE, FL 33316
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent	
RUPP, WILLIAM R. 1702 CORDOVA RD #2 FORT LAUDERDALE, FL 33316	

7. Name and Address of New Registered Agent	
Name <i>Rupp, William R.</i>	
Street Address (P.O. Box Number is Not Acceptable) <i>1322 S.E. 17th ST.</i>	
City <i>FT. Lauderdale</i>	Zip Code <i>33316</i>

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____	

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BAKER, CHARLE <input checked="" type="checkbox"/> Delete 1535 SE 17TH ST #307 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD SLATER, RANDY <input type="checkbox"/> Delete 1535 SE 17TH ST #309 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LAFEMINH, ROSE <input type="checkbox"/> Delete 1535 SE 17TH ST #210 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BECHE, TIMOTHY <input checked="" type="checkbox"/> Delete 1535 SE 17TH ST #110 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Randy Slater</i> <i>Randy Slater</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

40006810



01272007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1986059	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MCCOY, DONNA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1535 S.E. 15TH ST. # 106 FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SLATER, RANDY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1535 S.E. 15TH ST. # 309 FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD LAFEMINH, ROSE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1535 S.E. 15TH ST. # 210 FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SHAMET, JOSEPH <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1535 S.E. 15TH ST. #107 FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

Date Daytime Phone #