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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **755023** **(9)**

1. Corporation Name
HARBOR CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7909-11 E. DRIVE NORTH BAY VILLAGE FL 33141-3338 US	HARBOR CONDO ASSOC. INC. #211 1402 KENNEDY CAUSEWAY NORTH BAY VILLAGE FL 33141 US

3. Date Incorporated or Qualified: 11/06/1980
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-2051533 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ONCKELINX, EDWIN
#211
1402 KENNEDY CAUSEWAY
NORTH BAY VILLAGE FL 33141

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LUDWAY, JIM		1.2 NAME	
STREET ADDRESS	7911 EAST DRIVE APT. #7		1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141		1.4 CITY-ST-ZIP	
TITLE	V.P.	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MERCEDES, GARDENAS		2.2 NAME	
STREET ADDRESS	7909 EAST DRIVE APT. #204		2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141		2.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GUNST, MARK		3.2 NAME	
STREET ADDRESS	7911 EAST DRIVE APT. #3		3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141		3.4 CITY-ST-ZIP	
TITLE	TD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ONCKELINX, EDWIN		4.2 NAME	
STREET ADDRESS	12555 BISCAYNE BLVD. #784		4.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI FL 33181		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (9/96)

14. I do 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.

EDWIN ONCKELINX 4/17/97 (305) 757 4453