# FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
**1996**

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

DOCUMENT # 756330 (7)

1. Corporation Name

**HARBOUR TOWNE ASSOCIATION, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 5701 MIDNIGHT PASS RD.<br>SARASOTA FL 34242<br>US | 2828 PROCTOR ROAD<br>SARASOTA FL 34231<br>US |

3. Date Incorporated or Qualified: 02/12/1981
3a. Date of Last Report: 05/01/1995

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: 59-2257411 ☐ 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

KARP, MICHAEL
1333 DOCKSIDE PLACE
SARASOTA FL 34242

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 | VD | ☐ DELETE | 1.1 TITLE | VD | ☒ Change ☐ Addition |
| NAME | ~~BLOME, GLENN~~ | | 1.2 NAME | ZIMMER, DAN | |
| STREET ADDRESS | ~~1227 DOCKSIDE PLACE~~ | | 1.3 STREET ADDRESS | 1231 Dockside Place | |
| CITY-ST-ZIP | SARASOTA FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | ~~TD~~ | ☐ DELETE | 2.1 TITLE | | ☒ Change ☐ Addition |
| NAME | ~~WINSLER, ROBERT~~ | | 2.2 NAME | BOSSERMAN, BRUCE | |
| STREET ADDRESS | ~~3667 BOCA POINTE DRIVE~~ | | 2.3 STREET ADDRESS | 1303 Dockside Place | |
| CITY-ST-ZIP | SARASOTA FL | | 2.4 CITY-ST-ZIP | | |
| TITLE | ~~SD~~ | ☐ DELETE | 3.1 TITLE | | ☒ Change ☐ Addition |
| NAME | ~~MARQUIS, ROGER~~ | | 3.2 NAME | ROSENBAUM, ART | |
| STREET ADDRESS | ~~1307 DOCKSIDE PLACE~~ | | 3.3 STREET ADDRESS | 1215 Dockside Place | |
| CITY-ST-ZIP | SARASOTA FL | | 3.4 CITY-ST-ZIP | | |
| TITLE | ~~D~~ | ☐ DELETE | 4.1 TITLE | PD | ☒ Change ☐ Addition |
| NAME | DOWDY, THOMAS | | 4.2 NAME | | |
| STREET ADDRESS | 1233 DOCKSIDE PLACE | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | SARASOTA FL | | 4.4 CITY-ST-ZIP | | |
| TITLE | ~~PD~~ | ☐ DELETE | 5.1 TITLE | D | ☒ Change ☐ Addition |
| NAME | HUTCHINS, JANE | | 5.2 NAME | | |
| STREET ADDRESS | 1275 DOCKSIDE PLACE | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | SARASOTA FL | | 5.4 CITY-ST-ZIP | | |
| TITLE | ~~T~~ | ☒ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ~~PETERS, RALPH W. JR.~~ | | 6.2 NAME | | |
| STREET ADDRESS | ~~1321 DOCKSIDE PLACE~~ | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ~~SARASOTA FL~~ | | 6.4 CITY-ST-ZIP | | |

CR2E037 (12/95)

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)(k), 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:** Bruce N Rosenbaum 4/13/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #