## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

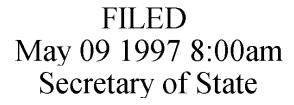
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(0)

HARBOR WOODS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address





3-11-97

2180 W SR 434 #5000 LONGWOOD FL 32779		2180 W SR 434 #5000 LONGWOOD FL 32779-5044								
						3. Date Incorporated or Qualified 05/26/1981	3a. Dat	o of Lar <b>5/01/</b>	st Report <b>1996</b>	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number			Applied For		
21		26			59-2095523		-	Not Applicable		
Sulte, Apt. (	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.7	5 Additional		
22		27			b. Commeate of Status Desired		Fee	Required		
City & State	)	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip 29	30	ntry		8. This corporation has liability for Intansible tax under s. 199.032, Florida Statutes Yes No				
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
				81	Name					
HART, JAMES W JR				62	Stroot A	eet Address (P.O. Box Number is Not Acceptable)				
	MANAGEMENT, INC.		Sireet Addi			docress (r.O. box Mulliber is Not Acceptable	,			
	STATE RD. 434, SUITE 5000		Ī	83						
LONGWO	OOD FL 32779		ŀ	84	City		<del></del>	85 2	Zip Code	
							FL	1		
11. Pursuant to office or re	o the provisions of Sections 617.0502 egistered agent, or both, in the State of	and 617.1508, Florida Statute of Florida. Such change was a	es, the ab authorized	ovo d by	named o	corporation submits this statement for the pur oration's board of directors. I hereby accept	pose of a	changir intment	ng its registered   t as registered	
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE _	Signature, typed or printed name of registered agen	A condition of the state of the					DATE			
12.	OFFICERS AND		13.	Age	it signature i	required when reinstating) ADDITIONS/CHANGES TO OFFICE		DIREC	10RS IN 12	
TITLE	SD 3	XX DELETE 1.1		LE	Т	VPD		Chan		
NAME	SCHACK, LYNN	1.2 N		ME		WASHAM, BILLY MAC			, yy	
STREET ADDRESS	435 CATAMARAN DR #51				ADDRESS	455 CATAMARAN DR #42 MERRITT ISLAND FL 32952				
CITY-ST-ZIP				TY-S1	r-ZIP	MERRITT ISLAND FL 32952			ļ	
TALE	PD	XX DELETE / 2.1				PD		Chan	ge XX Addition	
NAME	CROFT, EARL	2.2				SCHACK, ROBERT E			i	
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •			REE1	ADDRESS	540 BUTTONWOOD DR				
CITY-ST-ZIP				TY-S	T- <b>Z</b> IP					
TITLE	, <del>-</del>			LE			Į	Chan	ge L Addition	
NAME	JARVIS, MARGE		3.2 NA	ME						
STREET ADDRESS	435 CATAMARAN DR #53				address					
CITY-ST-ZIP	MERRITT ISLAND FL	XX DELETE	3 4. CI	_	T- ZIP	D		X Chan	ge Addition	
TITLE	D Speigner, Laura	(77) OFFEIG	4.1 TIT					LA Unan	ige L Addition	
NAME STREET ADDRESS	420 BREAKWATER DR #21		4.2 N/		400nean	LAFFERTY, GREGORY 20 BOGART PLACE				
CITY-ST-ZIP	MERRITT ISLAND FL		4.4 CIT		ADDRESS	MERRITT ISLAND FL 32953				
TITLE	VPD	9.3 DELETE 5.110			1-71	SD		Chan	ige Addition	
NAME	GRISAR, FRANCES	5.2 NJ			1	GRISAR, FRANCES	,	(A)		
STREET ADDRESS	100 01911110111 DD 400			5.3 STREET ADDRESS 4:		420 CATAMARAN DR #99				
CITY-ST-ZIP	MERRITT ISLAND FL	PT 401 AND 51			r-zip	420 CATAMARAN DR #99 MERRITT ISLAND FL 32953			ļ	
TITLE		☐ DELETE	6.1 TiT					Chan	ige Addition	
NAME			62 NA	ME	ļ				1	
STREET ADDRESS			6.3 ST	REET	address					
CITY-ST-ZIP			6.4 CI	IY-S	- ZIP					

. 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

CIGNATURE: This Add Add A.C.