FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#

1. Corporation Name

HARBOR WOODS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2180 W SR 434 #5000 LONGWOOD FL 32779

2180 W SR 434 #5000 LONGWOOD FL 32779

FILED Apr 19, 1999 8:00 am § Secretary of State

04-19-1999 90083 014 ****61.25



City & State City & State City & State 2p									
Suite, Apt. #, etc. Suite, Apt. #, etc.	2. Principal Pl	incipal Place of Business 2a. Mailing Address							
City & State City & City & City & State City & City & State City & City & State City & Ci	:1		26					<u> </u>	
City & State City & State City & State City & State Statutus Desired Fee Required Fee Required Fee Required Statutus Desired Fee Required Statutus Desired Statutus Desired Fee Required Statutus Desired Statutus D	Suite, Apt.	aite, Apt. #, etc. Suite, Apt. #, etc.							
See Required See	2	·	27						
28	City & State	9	City & State			5. Certificate of Status Desired	,		
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Name and Address of New Registered Agent 14. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Sections 617,0502 and 617,1508, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, Orthogonal Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the aboven-maned corporation submits this statement for the purpose of changing its registered agent. In the purpose	3		28				Fee Req	urred	
9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name HARTI, JAMES W JR SENTRY MANAGEMENT, INC. 2180 W. STATE RD. 434, SUITE 5000 LONGWOOD FL 32779 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heraby accept the appointment as registered green, and the registered agent agent agent and the registered agent agent agent and the registered agent agent agent and the registered agent agent and the registered agent agent agent and the registered agent agent agent and the registered agent	Zip	Country Zip C			y				
## HART, JAMES W JR SENTRY MANAGEMENT, INC. 2180 W. STATE RD. 434, SUITE 5000 LONGWOOD FL 32779 ## City FL 85 Zip Code ## City FL 85	25 29 30			L.,	Trust Fund Contribution Added to Fees			Fees	
HART, JAMES W JR SENTRY MANAGEMENT, INC. 2180 W. STATE RD. 434, SUITE 5000 LONGWOOD FI. 32779 44 City FL 55 Zip Code 17. 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 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, and accept the colligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signed. 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I ammiliate with, and accept the colligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered agent and the suppointment as registered agent and the provision of directors. I hereby accept the appointment as registered and statutes. 10. OFFICERS AND DIRECTORS 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STREET ADDRESS 14. CITY. ST. 2P 14. CITY. ST. 2P 15. STREET ADDRESS 16. CITY. ST. 2P 17. ST. 2P 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 12. NAME 12. NAME 13. STREET ADDRESS 14. CITY. ST. 2P 15. STREET ADDRESS 16. CITY. ST. 2P 17. ST. 2P 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND Addition 18. ADDITIONS/CHANGES TO OF		9. Name and Address of Current	Registered Agent		т.,	10. Name and Address of New Registered Age	nt		
SENTRY MANAGEMENT, INC. 2180 W. STATE RD. 434, SUITE 5000 LONGWOOD FL 32779 44 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 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, and accept the colligations of, Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 WASHAM, BILLY MAC 12. NAWE WASHAM, BILLY MAC 12. NAWE WASHAM, BILLY MAC 13. SIREET ADDRESS MERRITT ISLAND FL 14. CITY-51-2P THE DELETE 11. TITLE 12. OFFICERS AND DIRECTORS IN 12 WASHAM, BILLY MAC 13. STREET ADDRESS 14. CITY-51-2P TO Change Addition WASHAM, BILLY MAC 13. SIREET ADDRESS 14. CITY-51-2P THE DELETE 17. Change Addition Addition Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAWE 13. SIREET ADDRESS 14. CITY-51-2P THE DELETE 17. Change Addition Additio				81	Name				
SENTRY MANAGEMENT, INC. 2180 W. STATE RD. 434, SUITE 5000 LONGWOOD FL 32779 44 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 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, and accept the colligations of, Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 WASHAM, BILLY MAC 12. NAWE WASHAM, BILLY MAC 12. NAWE WASHAM, BILLY MAC 13. SIREET ADDRESS MERRITT ISLAND FL 14. CITY-51-2P THE DELETE 11. TITLE 12. OFFICERS AND DIRECTORS IN 12 WASHAM, BILLY MAC 13. STREET ADDRESS 14. CITY-51-2P TO Change Addition WASHAM, BILLY MAC 13. SIREET ADDRESS 14. CITY-51-2P THE DELETE 17. Change Addition Addition Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAWE 13. SIREET ADDRESS 14. CITY-51-2P THE DELETE 17. Change Addition Additio	HART, JAMES W JR				82 Street Address (P.O. Box Number is Not Acceptable)				
218 W. STATE RD. 434, SUITE 5000 LONGWOOD FL 32779 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 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, 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, 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, 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, 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, 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, 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, or both in the State of Florida. Such change agent agent and the if registered agent and the if registered agent. I hereby accept the appointment as registered agent. I hereby accept the appoint					<u> </u>				
LONGWOOD FL 32779 84	·			83	1			ľ	
Pursuant to the provisions of Sections 517 0502 and 517 1508, Florida Statutas, 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 office or registered agent, and the obligations of, Section 617 0503, Florida Statutas. SIGNATURE Signature, typed of protect agent of registered agent and this if applicable. POTE Registered Agent agenture required when relistating) DATE				84	City		5 Zip C	ode	
office or registered agent, or both, in the State of Florida. Such change was authorized by the Corporation's position of directors. Thereby accept the appointment as registered agent agent tall manual coupt the obligations of, Section 617.505.0, Florida Statutes regulated when reinstating) DATE Signature, typed or protect name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 12. TO XIZO Change Addition was a street addition and the responsibility of the reinstating) WASHAM, BILLY MAC 455 CATAMARAN DR., #42 1.3 STREET ADDRESS MERRITT ISLAND FL 1.4 CITY-ST-ZP MERRITT ISLAND FL 22 YMME 23 STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL 32 YMME 32 YMME 32 YMME 33 STREET ADDRESS MERRITT ISLAND FL 34 CITY-ST-ZP MERRITT ISLAND FL 35 CATAMARAN DR #53 36 STREET ADDRESS MERRITT ISLAND FL 27 YMME 37 STREET ADDRESS MERRITT ISLAND FL 38 STREET ADDRESS MERRITT ISLAND FL 39 DELETE 41 TITLE VD ZIMBRO, SHARON A 42 NAME 42 NAME 42 NAME 52 NAME 52 NAME 52 NAME 53 STREET ADDRESS 54 COTY-ST-ZP MERRITT ISLAND FL 52 NAME 53 STREET ADDRESS 54 COTY-ST-ZP MERRITT ISLAND FL 55 CATAMARAN DR, #70 42 STREET ADDRESS 54 COTY-ST-ZP MERRITT ISLAND FL 57 STARE STREET ADDRESS 58 STREET ADDRESS 58 STREET ADDRESS 59 STREET ADDRESS 59 STREET ADDRESS 50 Change Ch				- 1	1	FL	_ \ '		
12.	office or re agent. I as	egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was authons of, Section 617.0503, Florida	Statute:	the corpo	oration's board of directors. Frieleby accept the appointment	ent as reg	iştered	
WASHAM, BILLY MAC DELETE 1.1 mile TD WASHAM, BILLY MAC 12 NAME 455 CATAMARAN DR., #42 1.3 STREET ADDRESS MERRITT ISLAND FL DELETE 2.1 mile DELETE 2.2 NAME DELETE 2.2 NAME DELETE 2.2 NAME DELETE 2.3 STREET ADDRESS DELETE 2.3 STREET ADDRESS DELETE 3.1 mile DELETE					nt signature n		IRECTOR	RS IN 12	
WASHAM, BILLY MAC									
STREET ADDRESS 455 CATAMARAN DR., #42 1.3 STREET ADDRESS	ì	· · · ·	□ bereve					_	
MERRITT ISLAND FL	NAME			_	-T 4 DDDE-00				
DELETE PD DELETE 21 TITLE Change Addition SCHACK, ROBERT E 22 NAME 23 STREET ADDRESS STREET ADDRESS ADDRES	STREET ADORESS	*							
MAME SCHACK, ROBERT E SOM BUTTONWOOD DR. MERRITT ISLAND FL 32952 TITLE JARVIS, MARGE JARVIS,	CITY-ST-ZIP		FINCIETE		ST-ZIP		1 Change	Addition	
STREET ADDRESS STRY-ST-ZIP MERRITT ISLAND FL 32952 TILE JAVIS, MARGE JARVIS, MARGE JA	TITLE		DELETE			_	j enange		
MERRITT ISLAND FL 32952 TID MARE JARVIS, MARGE 435 CATAMARAN DR #53 MERRITT ISLAND FL TILE JARVIS, MARGE 436 CATAMARAN DR #53 MERRITT ISLAND FL TILE JARVIS, MARGE 32 NAME 33 STREET ADDRESS ALCITY-ST-ZIP MERRITT ISLAND FL JARVIS, MARGE 32 NAME 34 CITY-ST-ZIP MERRITT ISLAND FL JARVIS, MARGE 32 NAME 32 NAME 33 STREET ADDRESS ALCITY-ST-ZIP JARVIS, MARGE 34 CITY-ST-ZIP MERRITT ISLAND FL JARVIS, MARGE 34 CITY-ST-ZIP JARVIS, MARGE 34 CITY-ST-ZIP JARVIS, MARGE JARVIS, MAR	NAME								
TID JARVIS, MARGE JARVIS, MARGE 435 CATAMARAN DR #53 MERRITT ISLAND FL JUBBRO, SAHRON A 424 CATAMARAN DR, #70 MERRITT ISLAND FL 232952 MERRITT ISLAND FL 252 MAME STREET ADDRESS ALCITY-ST-ZIP MERRITT ISLAND FL 32352 JITHE JO JELETE ALTITIE JO JELETE MERRITT ISLAND FL JO JELETE ALTITIE JO JELETE MERRITT ISLAND FL JO JELETE JO J	STREET ADDRESS	*							
JARVIS, MARGE 435 CATAMARAN DR #53 MERRITT ISLAND FL D	CITY-ST-ZIP				ST-ZIP		Change	Addition	
A35 CATAMARAN DR #53 MERRITT ISLAND FL TITLE D AVAME ZIMBRO, SAHRON A 424 CATAMARAN DR, #70 MERRITT ISLAND FL TITLE SD AVAME GRISAR, FRANCES STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL DELETE 5.1 TITLE SD AVAME GRISAR, FRANCES STREET ADDRESS STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL DELETE 6.1 TITLE D AVAME BIRD, DEVAUGHN 1030 GTANDA AVE MERRITT ISLAND FL STREET ADDRESS MERRITT ISLAND FL DELETE 0.3 STREET ADDRESS MERRITT ISLAND FL MERRITT ISLAND FL DELETE 0.3 STREET ADDRESS MERRITT ISLAND FL	IUTE		ÀN DEFEIF			· -	Change		
MERRITT ISLAND FL JUMBRO, SAHRON A ASTREET ADDRESS ALTY-ST-ZIP MERRITT ISLAND FL 32952 JUMBRO, SAHRON A ASTREET ADDRESS ALTY-ST-ZIP MERRITT ISLAND FL 32952 JUMBRO, SHARON A ASTREET ADDRESS ALTY-ST-ZIP MERRITT ISLAND FL 32952 JUMBRO, SHARON A ASTREET ADDRESS ALTY-ST-ZIP JUMBRO, SHARON A ASTREET ADDRESS ACITY-ST-ZIP ASTREET ADDRESS ACITY-ST-ZIP AND ASTREET ADDRESS ACITY-ST-ZIP ASTREET ADDRESS ACITY-S	NAME								
TITLE D DELETE 1.1 TITLE VD ZIMBRO, SAHRON A ZIMBRO, SAHRON A 4.2 NAME 4.2 CATAMARAN DR, #70 MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952 DELETE 5.1 TITLE GRISAR, FRANCES 420 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE 5.4 CITY-ST-ZIP DELETE 6.1 TITLE D D DELETE 6.1 TITLE D DELETE D DELETE 6.1 TITLE D DELETE D DELETE DORSON DEVAUGHN 1.03 O GTANDA AVE MERRITT ISLAND FL 32952	STREET ADDRESS			3.3 STREE	TADDRESS				
ZIMBRO, SAHRON A 424 CATAMARAN DR, #70 MERRITT ISLAND FL 32952 TITLE SD GRISAR, FRANCES 420 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE 53 STREET ADDRESS 440 CTY-ST-ZIP CHANGE 540 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE 540 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE 65 TITLE DELETE 66 TITLE DAME 68 STREET ADDRESS 68 STREET ADDRESS GRISAR, FRANCES 40 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE D Change CM Addition Change CM Addition DAME STREET ADDRESS GRISAR, FRANCES 68 CITY-ST-ZIP MERRITT ISLAND FL DELETE MERRITT ISLAND FL 32952	CITY-ST-ZIP	MERRITT ISLAND FL		3.4. CITY-	ST-ZIP		. Ohanna	C Addition	
A24 CATAMARAN DR, #70 MERRITT ISLAND FL 32952 ### ### ### ### ### #### #### #### #	TITLE		∐ DELETE			 	y Change	☐ Addition	
MERRITT ISLAND FL 32952 A4 CITY-ST-ZIP GRISAR, FRANCES STREET ADDRESS A20 CATAMARAN DR., #99 MERRITT ISLAND FL DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP MERRITT ISLAND FL DELETE D Change Addition Change Addition Change Addition BIRD, DEVAUGHN 1030 GTANDA AVE MERRITT ISLAND FL 32952	NAME			4.2 NAME		ZIMBKU, SMAKUN A			
TITLE SD DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS DITY- ST-ZIP MERRITT ISLAND FL DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS GITY- ST-ZIP BIRD, DEVAUGHN 6.3 STREET ADDRESS GITY- ST-ZIP MERRITT ISLAND FL DOWN BIRD, DEVAUGHN 6.3 STREET ADDRESS GITY- ST-ZIP MERRITT ISLAND FL 32952	STREET ADDRESS			4.3 STREET ADDRESS					
GRISAR, FRANCES 420 CATAMARAN DR., #99 5.3 STREET ADDRESS MERRITT ISLAND FL DELETE D Change CATAMARAN DR., #99 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE D Change CATAMARAN DR., #99 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP D Change CATAMAR B I R D , D E V AUGHN 1030 GTANDA AV E MERRITT ISLAND FL 32952	CITY-ST-ZIP						7 Ch	T A addition	
420 CATAMARAN DR., #99 MERRITT ISLAND FL 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE JAME STREET ADDRESS 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP MERRITT ISLAND FL 3.9 STREET ADDRESS 6.4 CITY-ST-ZIP MERRITT ISLAND FL 3.9 STREET ADDRESS 6.4 CITY-ST-ZIP MERRITT ISLAND FL 3.2952	TITLE	T	☐ DELETE			<u></u>	1 cuange	☐ vacinou	
MERRITT ISLAND FL 5.4 CITY-ST-ZIP DELETE 6.1 TITLE D BIRD, DEVAUGHN 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP MERRITT ISLAND FL 3.2952	NAME	_							
TITLE D □ Change (X) Addition 62 NAME BIRD, DEVAUGHN 63 STREET ADDRESS 1030 GTANDA AVE 64 CITY-ST-ZIP MERRITT ISLAND FL 32952	STREET ADDRESS			l - '					
62 NAME 62 NAME BIRD, DEVAUGHN 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP MERRITT ISLAND FL 32952	CITY-ST-ZIP	MERRITT ISLAND FL						- CO A 4479	
STREET ADDRESS 1030 GTANDA AVE 6.4 CITY-ST-ZIP MERRITT ISLAND FL 32952	TITLE		☐ DELETE	İ		 	_ Change	(X) Addition	
64 City-st-zip MERRITT ISLAND FL 32952	NAME			6.2 NAME		BIRD DEVAUGHN			
64 City-st-zip MERRITT ISLAND FL 32952	STREET ADDRESS	}		6.3 STREI	ADDRESS	1030 GTANDA AVE		Ì	
	CITY-ST-ZIP			6.4 CITY-	ST-ZIP	MERRITT ISLAND FL 32952			

14. 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 of 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 charges, or or an attachment with an alteress, with all other like empowered.

SIGNATURE