

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758484

1. Entity 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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2095523

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HART, JAMES W JR  
SENTRY MANAGEMENT, INC.  
2180 W. STATE RD. 434, SUITE 5000  
LONGWOOD FL 32779

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☒ Delete  
NAME CODY, RICHARD  
STREET ADDRESS 420 BREAKWATER DR #17  
CITY-ST-ZIP MERRITT ISLAND FL 32953-3556

TITLE PD ☐ Change ☒ Addition  
NAME DESHAIES, RONALD J  
STREET ADDRESS 420 CATAMARAN DRIVE #88  
CITY-ST-ZIP MERRITT ISLAND, FL. 32953

TITLE SD ☒ Delete  
NAME ANTIMARELLI, BERTHA  
STREET ADDRESS 420 BREAKWATER DR., #19  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE VD ☐ Change ☒ Addition  
NAME BENWAY, ROBYN A  
STREET ADDRESS 505 LANDINGS WAY #12  
CITY-ST-ZIP MERRITT ISLAND, FL. 32952

TITLE VD ☒ Delete  
NAME JARVIS, MARGRET  
STREET ADDRESS 435 CATAMARAN DR #53  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE SD ☐ Change ☒ Addition  
NAME DADY, JONATHAN LEE  
STREET ADDRESS 455 CATAMARAN DRIVE #38  
CITY-ST-ZIP MERRITT ISLAND, FL., 32953

TITLE D ☒ Delete  
NAME CORBETT, JUDY  
STREET ADDRESS 425 CATARAN DR #66  
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE D ☐ Change ☒ Addition  
NAME BARTON, JUNE K  
STREET ADDRESS 515 LANDINGS WAY #77  
CITY-ST-ZIP MERRITT ISLAND, FL., 32952

TITLE TD ☐ Delete  
NAME WASHAM, BILLY MAC  
STREET ADDRESS 424 CATAMARAN DR., #70  
CITY-ST-ZIP MERRITT ISLAND FL 32954

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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:

ROBYN A BERNARD  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/1/02

321-455-2257

CR2E037 (9/01)

FILED  
Apr 16, 2002 8:00 am  
Secretary of State

04-16-2002 90108 039 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE