ANNUAL REPORT
1995

DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 14 AM 9:37

DOCUMENT # 765432 (0)

1. Corporation Name

HARBOUR TOWNE MARINA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6400 LAUREL CANYON BOULEVARD SUITE 200 NORTH HOLLYWOOD CA 91606	6400 LAUREL CANYON BOULEVARD SUITE 200 NORTH HOLLYWOOD CA 91606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/19/1982
3a. Date of Last Report: 02/14/1994
4. FEI Number: 58-1863466 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 16633 VENTURA BLVD.	26 16633 VENTURA BLVD.
Suite, Apt. #, etc. 22 SIXTH FLOOR	Suite, Apt. #, etc. 27 SIXTH FLOOR
City & State 23 ENCINO, CA	City & State 28 ENCINO, CA
Zip / Country 24 91436 / 25 USA	Zip / Country 29 91436 / 30 USA

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VST	11 TITLE	☒ Change ☐ Addition
NAME	SACHS, MICHAEL M.	12 NAME	
STREET ADDRESS	6400 LAUREL CANYON B.200	13 STREET ADDRESS	16633 VENTURA BLVD. 6th FLOOR
CITY-ST-ZIP	N. HOLLYWOOD CA	14 CITY-ST-ZIP	ENCINO, CA 91436
TITLE	D	21 TITLE	☒ Change ☐ Addition
NAME	SACHS, MICHAEL M.	22 NAME	
STREET ADDRESS	6400 LAUREL CANYON B.200	23 STREET ADDRESS	16633 VENTURA BLVD. 6th FLOOR
CITY-ST-ZIP	N. HOLLYWOOD CA	24 CITY-ST-ZIP	ENCINO, CA 91436
TITLE	VD	31 TITLE	☒ Change ☐ Addition
NAME	NELSON, PETER J.	32 NAME	
STREET ADDRESS	6400 LAUREL CANYON B.200	33 STREET ADDRESS	16633 VENTURA BLVD., 6th FLOOR
CITY-ST-ZIP	N. HOLLYWOOD CA	34 CITY-ST-ZIP	ENCINO, CA 91436
TITLE	D	41 TITLE	☒ Change ☐ Addition
NAME	ANDERSON, WILLIAM A.	42 NAME	
STREET ADDRESS	6400 LAUREL CANYON B.200	43 STREET ADDRESS	16633 VENTURA BLVD., 6th FLOOR
CITY-ST-ZIP	N. HOLLYWOOD CA	44 CITY-ST-ZIP	ENCINO, CA 91436
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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)(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.

SIGNATURE: Peter J. Nelson PETER J. NELSON (818) 907-0400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0074910