

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F95000006246 (1)

1. Corporation Name

HARBOUR TOWN - OP&F, INC.



Principal Place of Business

650 CALIFORNIA ST  
SUITE 1800  
SAN FRANCISCO CA 94108

Mailing Address

650 CALIFORNIA ST  
SUITE 1800  
SAN FRANCISCO CA 94108

3. Date Incorporated or Qualified

12/22/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Not Applicable

26 Not Applicable

4. FET Number

APPLIED FOR 94-3235533

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

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

Not Applicable

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

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
EGAN, GERALD E  
STREET ADDRESS  
875 N. MICHIGAN AVE, SUITE 4114  
CITY - ST - ZIP  
CHICAGO IL 60611

TITLE ☐ DELETE

NAME  
KING, JAMES D  
STREET ADDRESS  
875 N. MICHIGAN AVE, SUITE 4114  
CITY - ST - ZIP  
CHICAGO IL 60611

TITLE ☐ DELETE

NAME  
COOK, ROBERT J  
STREET ADDRESS  
875 N. MICHIGAN AVE, SUITE 4114  
CITY - ST - ZIP  
CHICAGO IL 60611

TITLE ☐ DELETE

NAME  
THOMPSON, GARY L  
STREET ADDRESS  
875 N. MICHIGAN AVE, SUITE 4114  
CITY - ST - ZIP  
CHICAGO IL 60611

TITLE ☐ DELETE

NAME  
FEINBERG, PETER F  
STREET ADDRESS  
55 E. 52ND ST, 31ST FLOOR  
CITY - ST - ZIP  
NEW YORK NY 10055

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2. 1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3. 1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4. 1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5. 1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6. 1 TITLE ☐ Change ☒ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

TS

Ferkull, Paula M.  
875 N. Michigan Ave., Suite 4114  
Chicago, IL 60611

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Paula M. Ferkull*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 20, 1996 (312) 266-9300

Date

Daytime Phone #

CR2E034 (12/95)