

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **K32937** (0)

1. Corporation Name

**ARRANGEMENTS OF HARBOR BEACH, INC.**



Principal Place of Business

Mailing Address

**1401 E. BROWARD BLVD.  
SUITE 204  
FT. LAUD. FL 33301  
US**

**305 S. ANDREWS AVE.  
C/O G. WARE CORNELL JR P.O. BOX 14633  
FT. LAUDERDALE FL 33301-1859**

3. Date Incorporated or Qualified

**09/12/1988**

3a. Date of Last Report

**03/16/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

**65-0066659**

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

**WASSON, A.J.  
5555 NW 95TH AVENUE  
SUNRISE FL 33351**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

**PSD**

☐ DELETE

1.1 TITLE

☐ Change

☐ Addition

NAME

**BOYLE, JANET A.**

1.2 NAME

STREET ADDRESS

**2176 S.E. 17TH ST**

1.3 STREET ADDRESS

CITY - ST - ZIP

**FT. LAUDERDALE FL**

1.4 CITY - ST - ZIP

TITLE

**V**

☐ DELETE

2.1 TITLE

☐ Change

☐ Addition

NAME

**MICHELS, JAMES F**

2.2 NAME

STREET ADDRESS

**2176 SE 17TH ST**

2.3 STREET ADDRESS

CITY - ST - ZIP

**FT LAUDERDALE FL**

2.4 CITY - ST - ZIP

TITLE

**T**

☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

**TREGGASER, EDWARD**

3.2 NAME

STREET ADDRESS

**2176 SE 17TH ST**

3.3 STREET ADDRESS

CITY - ST - ZIP

**FT LAUDERDALE FL**

3.4 CITY - ST - ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

4.2 NAME

STREET ADDRESS

☐ DELETE

4.3 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

4.4 CITY - ST - ZIP

TITLE

☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

5.2 NAME

STREET ADDRESS

☐ DELETE

5.3 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

5.4 CITY - ST - ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.2 NAME

STREET ADDRESS

☐ DELETE

6.3 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

6.4 CITY - ST - ZIP

TITLE

☐ DELETE

6.5 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.6 NAME

STREET ADDRESS

☐ DELETE

6.7 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

6.8 CITY - ST - ZIP

TITLE

☐ DELETE

6.9 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.10 NAME

STREET ADDRESS

☐ DELETE

6.11 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

6.12 CITY - ST - ZIP

TITLE

☐ DELETE

6.13 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.14 NAME

STREET ADDRESS

☐ DELETE

6.15 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

6.16 CITY - ST - ZIP

TITLE

☐ DELETE

6.17 TITLE

☐ Change

☐ Addition

NAME

☐ DELETE

6.18 NAME

STREET ADDRESS

☐ DELETE

6.19 STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

6.20 CITY - ST - ZIP

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)