

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000000907

FILED
Apr 21, 2003
Secretary of State

Entity Name: HARBOUR POINT VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

15051 TAMIAMI TRAIL
SUITE 203
FT MYERS, FL 33908

New Principal Place of Business:

15051 S TAMIAMI TRAIL
SUITE 203
FT MYERS, FL 33908

Current Mailing Address:

15051 TAMIAMI TRAIL
SUITE 203
FT MYERS, FL 33908

New Mailing Address:

15051 S TAMIAMI TRAIL
SUITE 203
FT MYERS, FL 33908

FEI Number: 35-2166609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSOER, GEORGE JR.
KNOTT, CONSOER, EBELINI, HART & SWETT, PA
1625 HENDRY STREET, SUITE 301
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ADKINS, EDWARD D
Address: 15051 TAMIAMI TRAIL STE 203
City-St-Zip: FT MYERS, FL 33908

Title: DST () Delete
Name: STRATTON, CINDY A
Address: 15051 TAMIAMI TRAIL STE 203
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: ADKINS, SANDRA
Address: 15051 TAMIAMI TRAIL STE 203
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ADKINS, EDWARD D
Address: 15051 S TAMIAMI TRAIL STE 203
City-St-Zip: FT MYERS, FL 33908

Title: DST (X) Change () Addition
Name: STRATTON, CINDY A
Address: 15051 S TAMIAMI TRAIL STE 203
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: ADKINS, SANDRA
Address: 15051 S TAMIAMI TRAIL STE 203
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD D ADKINS

DP

04/21/2003

Electronic Signature of Signing Officer or Director

Date