

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90053 021 ****61.25

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1. Entity Name
**HARBOUR ISLE YACHT & RACQUET CLUB
CONDOMINIUM ASSOCIATION, SECTION VII, INC.**



Principal Place of Business
**CAPTIAL PROPERTIES GROUP, INC.
3364 CLEVELAND AVE.
FORT MYERS, FL 33901**

Mailing Address
**CAPTIAL PROPERTIES GROUP, INC.
3364 CLEVELAND AVE.
FORT MYERS, FL 33901**

40023606



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02052007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-1090662

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**RAGER, KENNETH D
CAPITAL PROPERTIES GROUP, INC
3364 CLEVELAND AVE.
FORT MYERS, FL 33901**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME ADANIA, PETER
STREET ADDRESS 15160 HARBOR ISLE DR. #202
CITY-ST-ZIP FORT MYERS, FL 33908

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

TITLE ~~STB~~ ☐ Delete
NAME JORGENSEN, BRENTON BRENTON
STREET ADDRESS 15160 HARBOR ISLE DR #501
CITY-ST-ZIP FORT MYERS, FL 33908

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

TITLE ~~JD~~ ☐ Delete
NAME JACOBSEN, JOHN
STREET ADDRESS 15160 HARBOUR ISLE DR., #601
CITY-ST-ZIP FORT MYERS, FL 33908

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME REASONER, GARRETT
STREET ADDRESS 15160 HARBOUR ISLE #402
CITY-ST-ZIP FT. MYERS, FL 33908

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SEC/TREASURER ☐ Change ☒ Addition
NAME BOWLINGER, ROBERT
STREET ADDRESS 15160 HARBOUR ISLE DR. #802
CITY-ST-ZIP FT. MYERS, FL 33908

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 exemptions contained in Chapter 119, 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:

Garrett Reasoner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/07 (239) 481-1414
Date Daytime Phone #

GARRETT REASONER