

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N12849 (8)

1. Corporation Name

HARBOR INN AT THE MOORINGS ASSOCIATION, INC.



Principal Place of Business

2125 WINDWARD WAY  
VERO BEACH FL 32963

Mailing Address

P.O. BOX 2922 N/A  
VERO BEACH FL 32961-2922  
JUS

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a Mailing Address

26

Suite, Apt. #, etc.

27

City & State

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Zip

Country

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32961

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U.S.

9. Name and Address of Current Registered Agent

GAMBLE, ROBERT H  
2115 WINDWARD WA #204  
VERO BEACH FL 32963

GUTMANN, BARBARA  
2140 SPYGLASS LANE 212  
VERO BEACH FL 32963

3. Date Incorporated or Qualified

01/03/1986

3a. Date of Last Report

03/23/1995

4. FEI Number

59-2624345

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

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

RG

Robert H. Gamble

Barbara Gutmann

President

4/11/96

DATE

BARBARA GUTMANN

DATE

4/11/96

DATE

4/11/96

DATE

4/11/96

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

GAMBLE, ROBERT H

STREET ADDRESS

2115 WINDWARD WAY #204

CITY-ST-ZIP

VERO BEACH FL

TITLE

SR P.D.

NAME

GUTMANN, BARBARA

STREET ADDRESS

85 QUAIL HOLLOW DRIVE

CITY-ST-ZIP

MORELAND HILLS OH

TITLE

D Assist's

NAME

HARBAUGH, BARBARA B

STREET ADDRESS

2140 SPYGLASS LANE #114

CITY-ST-ZIP

VERO BEACH FL

TITLE

VP D

NAME

WARDELL, JOHN, M

STREET ADDRESS

42 BRISTOL PLACE

CITY-ST-ZIP

BAY HEAD NJ

TITLE

D

NAME

JENNES, ERNEST W

STREET ADDRESS

2115 WINDWARD WAY #205

CITY-ST-ZIP

VERO BEACH FL

TITLE

SR S/D

NAME

MCINTOSH, JAMES

STREET ADDRESS

1001 BAY ROAD, #108C

CITY-ST-ZIP

VERO BEACH FL

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12:

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

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