

DOCUMENT # N15689

1. Entity Name

HARBOR ISLES CONDOMINIUM ASSOCIATION OF BREVARD,

FILED
May 02, 2000 8:00 am
Secretary of State

02-02-2000 90036 002 ****61.25

Principal Place of Business

Mailing Address

600 S. BREVARD AVE. #201
 COCOA BCH. FL 32931

600 S. BREVARD AVE.
 COCOA BCH. FL 32931-2509



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Cocoa Bch, FL
 Suite, Apt. #, etc.
 600 S. Brevard Ave.
 City & State
 Cocoa Bch, FL
 Zip
 32931
 Country
 USA

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4. FEI Number

59-2857032

Applied For

Not Applicable

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

BECKER & POLIAKOFF C/O C. JOHN CHRISTENSEN
 901 N. DESTINY DRIVE
 SUITE 145
 MAITLAND FL 32751

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES ARE \$61.25

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Delete
NAME	FALLEN, THEADORE	
STREET ADDRESS	630 S. BREVARD AVE. #1111	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	D	☒ Delete
NAME	HUNT, LAURIE	
STREET ADDRESS	540 S. BREVARD AVE #417	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	D	☒ Delete
NAME	BOWLES, EUGENE	
STREET ADDRESS	520 S. BREVARD AVE #212	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	D	☒ Delete
NAME	GAINES, IRENE	
STREET ADDRESS	560 S. BREVARD AVE #613	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	D	☒ Delete
NAME	JEWELL, LISA	
STREET ADDRESS	520 S. BREVARD AVE #236	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☒ Change ☐ Addition
NAME	President Ken Rattenbury	
STREET ADDRESS	540 S. Brevard Ave #427	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	D	☒ Change ☐ Addition
NAME	V. President Laurie Hunt	
STREET ADDRESS	540 S. Brevard Ave. #417	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	D	☒ Change ☐ Addition
NAME	Director John Huri	
STREET ADDRESS	560 S. Brevard Ave #634	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	D	☒ Change ☐ Addition
NAME	Treasurer Joan Smith	
STREET ADDRESS	520 S. Brevard Ave #213	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	D	☒ Change ☐ Addition
NAME	Secretary Irene Gaines	
STREET ADDRESS	560 S. Brevard Ave #613	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Irene Gaines, Secretary

1-20-2000 799-8139

CR2E037 (9/99)