

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 # N20507 (2)

1. Corporation Name

HARBOUR RIDGE YACHT CLUB, INC.



Principal Place of Business

Mailing Address

**12600 HARBOUR RIDGE BLVD
PALM CITY FL 34990-8033
US**

**12600 HARBOUR RIDGE BLVD
PALM CITY FL 34990-8033
US**

3. Date Incorporated or Qualified
05/06/1987

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHANDLER, JOSEPH W
2004 ROYAL FERN CT.
PALM CITY FL 34990**

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

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

(NOTE: Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **HOFF, LESLIE L.**
STREET ADDRESS **2015 LAUREL OAK LANE**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **D** ☒ DELETE
NAME **TOWNER, DALLAS**
STREET ADDRESS **2022 LAUREL OAK LANE**
CITY-ST-ZIP **PALM CITY FL 34990-8033**

TITLE **D** ☒ DELETE
NAME **KIDD ROBERT P.B.**
STREET ADDRESS **1511 SAWERALL WAY**
CITY-ST-ZIP **PALM CITY FL 34990-8033**

TITLE **D** ☐ DELETE
NAME **WOODS HUGH E**
STREET ADDRESS **12454 HARGOVE RIDE BLVD**
CITY-ST-ZIP **PALM CITY FL 34990-8033**

TITLE **D** ☒ DELETE
NAME **DAWSON, EDWARD A**
STREET ADDRESS **1548 BUTTON BUSH CIRCLE**
CITY-ST-ZIP **PALM CITY FL**

TITLE **D** ☐ DELETE
NAME **HEARONS, JAMES S.**
STREET ADDRESS **709 WINTERS CREEK RD.**
CITY-ST-ZIP **PALM CITY FL 34990**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **SMITH, WILLIAM F.**
1.3 STREET ADDRESS **1514 SAWGRASS WAY**
1.4 CITY-ST-ZIP **PALM CITY FL 34990**

2.1 TITLE **D** ☐ Change ☒ Addition
2.2 NAME **BENEDICT, GERALD E.**
2.3 STREET ADDRESS **1202 WINTERS CREEK ROAD**
2.4 CITY-ST-ZIP **PALM CITY FL 34990**

3.1 TITLE **D** ☐ Change ☒ Addition
3.2 NAME **HUGHITT JEREMIAH K.**
3.3 STREET ADDRESS **1506 SWEETBAY CIRCLE**
3.4 CITY-ST-ZIP **PALM CITY, FL 34990**

4.1 TITLE **D** ☐ Change ☒ Addition
4.2 NAME **WHITTAKER, WILLIAM D.**
4.3 STREET ADDRESS **12733 MARINER COURT**
4.4 CITY-ST-ZIP **PALM CITY, FL. 34990**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

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

3/26/96 **407-336-1112**
Date Daytime Phone #

CR2E037 (12/95)