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04-05-1999 90009 026 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N20507

1. Corporation Name

HARBOUR RIDGE YACHT CLUB, INC.

Principal Place of Business

12600 HARBOUR RIDGE BLVD
PALM CITY FL 34990-8033
US

Mailing Address

12600 HARBOUR RIDGE BLVD
PALM CITY FL 34990-8033
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

05/06/1987

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

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

(NOTE: Registered Agent signature required when reinstating)

3-29-99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME
HOFF, LESLIE L.
STREET ADDRESS
2015 LAUREL OAK LANE
CITY-ST-ZIP
PALM CITY FL 34990

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☒ DELETE

NAME
BERGERON, GERALD E
STREET ADDRESS
1202 WINTERS CREEK ROAD
CITY-ST-ZIP
PALM CITY FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
HUGHITT, JEREMIAH K
STREET ADDRESS
1506 SWEETBAY CIRCLE
CITY-ST-ZIP
PALM CITY FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
WHITTAKER, WILLIAM D
STREET ADDRESS
12783 MARINER COURT
CITY-ST-ZIP
PALM CITY FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
SMITH, WILLIAM F
STREET ADDRESS
1514 SAWGRASS WAY
CITY-ST-ZIP
PALM CITY FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☒ DELETE

NAME
HEARONS, JAMES S.
STREET ADDRESS
709 WINTERS CREEK RD.
CITY-ST-ZIP
PALM CITY FL 34990

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph W. Chandler 3-29-99 561 3361111
Date Daytime Phone #

CR2E037 (1/98)