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FILED

Mar 25 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N32272 (9)

1. Corporation Name

HARMONY SHORES BUSINESS ASSOCIATION, INC.

Principal Place of Business

3078 TAMiami TRAIL SOUTH
NAPLES FL 33962
US

Mailing Address

C/O JAMES CLARK
77 RIVER DRIVE
NAPLES FL 34112-5731
US3. Date Incorporated or Qualified
05/12/19893a. Date of Last Report
03/27/1996

4. FEI Number

65-0158071

Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, JAMES
77 RIVER DRIVE
NAPLES FL 33962

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MOSHER, PHIL
STREET ADDRESS 24 BAMBOO DRIVE
CITY-ST-ZIP NAPLES FL
☒ DELETE1.1 TITLE PD
1.2 NAME Haskell, Albert
1.3 STREET ADDRESS 5 Bamboo Dr.
1.4 CITY-ST-ZIP Naples, Fl.
☒ Change ☐ AdditionTITLE VP
NAME LUELLEM JOHN JR
STREET ADDRESS 4 BAMBOO DRIVE
CITY-ST-ZIP NAPLES FL
☒ DELETE2.1 TITLE VP
2.2 NAME George Lopes
2.3 STREET ADDRESS 221 Mango Dr.
2.4 CITY-ST-ZIP Naples, Fl.
☒ Change ☐ AdditionTITLE T
NAME HASKELL, ALBERT
STREET ADDRESS 5 BAMBOO DRIVE
CITY-ST-ZIP NAPLES FL
☒ DELETE3.1 TITLE T
3.2 NAME Hilda Stevens
3.3 STREET ADDRESS 107 River Dr.
3.4 CITY-ST-ZIP Naples, Fl.
☒ Change ☐ AdditionTITLE S
NAME HASKELL, SYLVIA
STREET ADDRESS 5 BAMBOO DRIVE
CITY-ST-ZIP NAPLES FL
☒ DELETE4.1 TITLE S
4.2 NAME Margaret Hackett
4.3 STREET ADDRESS 84 River Dr.
4.4 CITY-ST-ZIP Naples, Fl.
☒ Change ☐ AdditionTITLE D
NAME JENNINGS RUSSELL
STREET ADDRESS 7 BAMBOO DRIVE
CITY-ST-ZIP NAPLES FL
☒ DELETE5.1 TITLE D
5.2 NAME MaryEllen Luellen
5.3 STREET ADDRESS 2 Bamboo Dr.
5.4 CITY-ST-ZIP Naples, Fl.
☒ Change ☐ AdditionTITLE D
NAME RARDIN, ELINORE
STREET ADDRESS 112 LAKESIDE DRIVE
CITY-ST-ZIP NAPLES FL
☐ DELETE6.1 TITLE D
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

Albert Haskell

3/21/97

941-732-5283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0060022

CR2E037 (9/96)