FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

DEJAGER, HAROLD R

PUNTA GORDA FL 33950

2101 BAYOU ROAD

MHAROLD R DEJAGER 2101 BAYOU ROAD **PUNTA GORDA FL 33950**

Suite, Apt. #, etc.

City & State

21

22

23 Zip

24

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

CHARLOTTE HARBORWATCH INC.

N37189

(0)

FILLD
Mar 24 1998 8:00am
Secretary of State

- B Albander Can after kanne bibbe tokke ebek diber daden biber biber beber beber biber

B5

Zip Code

CH CD

of Business		······································								
AGER ND 1. 33950	%HAROLD R DEJAGER 2101 BAYOU ROAD PUNTA GORDA FL 33950				3. Date Incorporated or Qualified 03/21/1990					
C 900,0					4.	FEI Number	Applied For			
						<u>65-0191261</u>	Not Applicable			
ce of Business	2a. Mailing Add	dress			6.	Certificate of Status Desired		\$8.75 Additional Fee Regulred		
etc.	Suite, Apt. :	#, etc.			6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
	City & State				7.	Is this nonprofit corporation a l		rs association?		
Country 25	Zıp	30	untry		8.	This corporation owes or has p Personal Property Tax due Jun		irrent year Intangible Yes Air		
9. Name and Address of Cu	rrent Registered Agent		1		10.	Name and Address of New R	egistered	Agent		
			81	Name						
, HAROLD R			82 Street Address (P.O. Box Number is Not Acceptable)							

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

83

84 City

office or re agent. I ar	egistered agent, or both, in the State of Florida m familiar with, and accept the obligations of, i	i. Such change was a Section 617.0503, Flo	iuthorized by the cor irida Statutes.	poration's board	of directors. I hereb	by accept the a	ippointment as	registered
SIGNATURE _	Signature, typed or printed name of registered agent and title if	apolicable (NOTE	Registered Agent signature	e regulard when rejected	ina)	DATE		
12. OFFICERS AND DIRECTORS		13.		IONS/CHANGES TO			S IN 12	
TITLE	VPD	DELETE	1.1 TITLE				Change	Addition
NAME	CAMERON, DONALD		1.2 NAME	İ				
STREET ADDRESS	34951 WASHINGTON LOOP RD		1.3 STREET ADDRESS	3228	ORGAA A GORO	7.7 7		
CITY-ST-ZIP	Punta gorda fl		1.4 CITY - ST- ZIP	PUNT	a coreo	A PL	339	
TITLE	SD	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME (LYNCH, ROBERT		2.2 NAME	l				
STREET ADDRESS	245 LIDO DRIVE		2.3 STREET ADDRESS	1				
CITY-ST-ZIP	PUNTA GORDA FL		2.4 CITY-ST-ZIP					3950
TITLE	TD	☐ DELETE	3.1 TITLE	[☐ Change	Addition
NAME	DEJAGER, HAROLD R		3.2 NAME	i				
STREET ADDRESS	2101 BAYOU ROAD		3.3 STREET ADDRESS]				
CITY-ST-ZIP	PUNTA GORDA FL		3.4. CITY-ST-ZIP					<u> 3750</u>
TITLE	PD	DELETE	4.1 TITLE				Change	Addition
NAME	Bossman, Brenda		4. 2 NAME					
STREET ADDRESS	2424 PLACIDA RD #303D		4.3 STREET ADDRESS				-	21/071
CITY-ST-ZIP	ENGLEWOOD FL		4.4 CITY-ST-ZIP	<u> </u>				342Z4
TITLE		DELETE	5.1 TITLE		-		Change	Addition
NAME			5.2 NAME	Į.				
STREET ADDRESS			5.3 STREET ADDRESS					
CITY - ST - ZIP			5.4 CITY - ST - ZIP					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME			6.2 NAME	ļ				
STREET ADDRESS			6.3 STREET ADDRESS					
CITY - \$T. 7IP			SACITY-ST-789	1				

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.