FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

N43596 DOCUMENT #

(8)

Mailing Address

LITTLE HARBOR ON THE HILLSBORO HOMES ASSOCIATION , INC.

	of Business AST 4TH DRIVE EACH FL 33441	Mailing Address 0 4- 1123 Northeast 4th Drive Deerfield Beach Fl 33441			r reaction ein eilend sinet seine seine sein eiser breit breit bibli eiler bibli iber			
					 Date Incorporated or Qualified 05/23/1991 	3a. Date of Last 02/28/19		
Principal Place of Business The Principal Place of Business		2a. Mailing Address			4. FEI Number 65-0237502	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution	9 \$5.00 May Be Added to Fees		
Zip	Country 25	Zíp	—	intry	8. This corporation has liability for in	ntangible tax under s.		7
24	9. Name and Address of Current	Penistered Agent	30	r		Yes No		_
	5. Name and Abbites of Current	LIABISIAIAN WASIII		81 Name	10. Name and Address of New Re	egistered Agent		
LAPP, M	II TON C			Name				
	RTHEAST 4TH DRIVE			82 Street	Address (P.O. Box Number is Not Acceptable	8)		7
DEERFIE	LD BEACH FL 33441			83	- And Andrews (All and Andrews	· · · · ·		┪
				B4 City		FL 85 Z4	Code	\dashv
11. Pursuant t	to the provisions of Sections 617,0502;	and 617.1508, Florida Statute	es, the abo	ve-named corporation's	proporation submits this statement for the purp board of directors. I hereby accept the appo	voce of changing its r	egistered office	e
familiar wit	th, and accept the obligations of, Section	n 617.0503, Florida Statutes.	oa by the t	o poration a	bosic of directors. Thereby accept the appo	TRITION &S 109IS(0100	agent. Lam	
SIGNATURE _	Signature, typed or printed name of registered agent as	nd title if applicable. (NOT	TE: Rogistered	Agent signature	equired when reinstating)	DATE	 	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	RS IN 12	⊣શ
TITLE	P	☐ DELETE		TLE	Change		Addition	75
NAME	HARTE, JUDY		1.2 N	AME				CR2E037 (12/95)
STHEET ADDRESS	43 NE 11TH WAY		1.3 \$1	REET ADDRESS				୍ବାଞ୍ଚ
CiTY - ST - ZiP	DEERFIELD BEACH FL		1.4 00	TY-ST-ZIP				Ķ
TITLE	S DELETE		2.1 TO	TLE		Change	Addition	당
NAME	Brown, Suzanne		2.2 N	AME				
STREET ADDRESS	46 NE 11TH WAY		2.3 51	REET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		2.40	ITY-ST-ZIP				
TITLE	D	⊠ DELETE	3.1 7)	TLE	D	☐ Change	Addition	7
NAME	*DAVIS, DEBRA	•	3.2 N/	AME	Diene Zerdin		•	
STREET ADDRESS	1101 NE 4TH DR		3.3 \$1	REET ADDRESS	22 NE IM Way			
CITY-ST-ZIP	DEERFIELD BEACH FL		3.4 C	ITY-ST-ZIP	Dertiera Boach fl.			
TITLE	D	DELETE	4.1 TO	TLE	D	☐ Change	Addition	1
NAME	-WARREN; CHEILA	,	4. 2 N	AME	Gwen M. Lai			
STREET ADORESS	65 NE-11TH WAY		4.3 ST	REET ADDRESS	1102 NE 4336			
CITY-ST-ZIP	DESPEIELD BEACH FL		4.4 CI	TY-ST-ZIP	Deerfield Boach FL	_		
TITLE	D	DELETE	5.1 TI	TLE		☐ Change	Addition	ヿ゙
NAME	LINDSTROM, BETTY		5.2 N/	ME				
STREET ADDRESS	1104 NORTHEAST 4TH DRIVE		5.3 ST	REET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL			TY-ST-ZIP				İ
TITLE	1	DELETE	61 TI			☐ Change	☐ Addition	ヿ゙
NAME	LAPP, MILTON C.		62 N/	AME		- •		
STREET ADDRESS	1108 NE 4TH DR			REET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL			TY-ST-ZIP				
					L			

SIGNATURE:

11 41

ATURE AND TYPED OR PRINTED NAME TRAIGNING OFFICER OR DIRECTOR

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), Fiorida 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 cath; that I am an original 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 of Block 11 if changed or on an attachment with an address.