FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000004261 (4)

1. Corporation Name

HABERSHAM HARBOUR III HOMEOWNERS ASSOCIATION, IN C.

Principal Place of Business	Mailing Address
320 EAST ADAMS STREET JACKSONVILLE FL 32202	320 EAST ADAMS STREET JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/17/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3209880 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22 2315 FAIRFIELD CT	Suite, Apt. #, etc.: 27 2315 FAIRFIELD CT
City & State: 23 ORANGE PARK FL.	City & State: 28 ORANGE PARK FL.
Zip: 24 32073 Country: 25 CTY USA	Zip: 29 32073 Country: 30 CTY USA

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. 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
DAWSON, CARD D JR. 320 EAST ADAMS STREET JACKSONVILLE FL 32202	81 Name: C. H. Schulke 82 Street Address (P.O. Box Number is Not Acceptable): 1753 Waterbury Ln. 83 84 City: ORANGE PARK FL 85 Zip Code: 32073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 4-12-95
Signature of one of the above officers (registered agent and title if applicable) (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	11 TITLE	Secretary	☐ Change ☐ Addition
NAME	DAWSON, CARL D JR.	12 NAME	Rebecca A. Pearce	
STREET ADDRESS	320 EAST ADAMS STREET	13 STREET ADDRESS	1750 Waterbury Lane	
CITY-ST-ZIP	JACKSONVILLE FL 32202	14 CITY-ST-ZIP	O.P. FL 32073	
TITLE	VDD	21 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	DAWSON, CARL D SR.	22 NAME	BRUCE W. MCCURDY	
STREET ADDRESS	320 EAST ADAMS STREET	23 STREET ADDRESS	2332 FAIRFIELD CT.	
CITY-ST-ZIP	JACKSONVILLE FL 32202	24 CITY-ST-ZIP	O.P. FL. 32073	
TITLE	SD	31 TITLE	Director	☐ Change ☐ Addition
NAME	BENNETT, SUSAN L	32 NAME	George M Proulx	
STREET ADDRESS	320 EAST ADAMS STREET	33 STREET ADDRESS	2319 Sterling way	
CITY-ST-ZIP	JACKSONVILLE FL 32202	34 CITY-ST-ZIP	O.P FL. 32073	
TITLE	President	41 TITLE	Director	☐ Change ☐ Addition
NAME	C. H. Schulke	42 NAME	Denis S. James	
STREET ADDRESS	1753 Waterbury Ln.	43 STREET ADDRESS	1761 Waterbury Lane	
CITY-ST-ZIP	ORANGE PARK FL 32073	44 CITY-ST-ZIP	O.P. FL 32073	
TITLE	Vice President	51 TITLE		☐ Change ☐ Addition
NAME	ALICE STILES	52 NAME		
STREET ADDRESS	1749 WATERBURY LN.	53 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL 32073-7764	54 CITY-ST-ZIP		
TITLE	TREASURER	61 TITLE		☐ Change ☐ Addition
NAME	DAVID ADAMS	62 NAME		
STREET ADDRESS	2316 FAIRFIELD CT	63 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK, FL 32073	64 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)(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: [signature] C. H. Schulke 4-12-95 269-7768
Signature and Typed or Printed Name of Individual Date Daytime Phone #

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