FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400005160

1. Corporation Name

HARBOR ROAD NORTH, JUPITER HEIGHTS DOCK OWNERS A SSOCIATION, INC.

Principal Place of Business 3492 HARBOR RD NORTH JUPITER FL 33469

Mailing Address

FILED Jun 10, 1999 8:00 am Secretary of State

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3492 HARBOR RD NORTH JUPITER FL 33469 US		3492 Harbor Road North Jupiter FL 33469						
2. Principal Place of Business		2a. Mailing Address	····		3. Date Incorporated or Qualifed			
21	2	26			10/17/1994		, , , , , , , , , , , , , , , , , , , 	
Suite, Apt. #, etc.	_	Suite, Apt. #, etc.			4. FEI Number			ied For
22	2	27			65-0663215			Applicable
City & State		City & State			5. Certificate of Status Desired	¬	Fee Req	1
Zip	Country	Zip	Counti	у	6. Election Campaign Financing		\$5.00 M	
24 25		· 	30		Trust Fund Contribution	logistared Age	Added to	rees
9. Name and	Address of Current Re	egistered Agent	8	1 Name	10. Name and Address of New F	egistered Age	nt	
			ľ	Name				
LEO, PETER H			8	2 Street Add	dress (P.O. Box Number is Not Accepta	ble)		
3492 HARBOR ROAD NO	RTH		8	3				
JUPITER FL 33469				A 015	<u> </u>	8	5 Zip Co	nde .
			8	1		FL	1	l
11. Pursuant to the provisions office or registered agent, cagent. I am familiar with, an	of Sections 617.0502 and both, in the State of Fland accept the obligations	nd 617.1508, Florida Statute lorida. Such change was at s of, Section 617.0503, Flor	es, the abouthorized b	ve-named cory y the corpora	rporation submits this statement for the tion's board of directors. I hereby accept	purpose of char the appointment	nging its re ent as regi:)	egistered stered
SIGNATURE ZE	ted name of registered agent and	title if applicable. (NOTE	Registered Ag	ent signature requi	ired when reinstating)	DATE		
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OF	ICERS AND D	IRECTOR	S IN 12
TITLE D		☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME LEO, PETER H	1		1.2 NAME	:				
	ROAD NORTH		1,3 STRE	ET ADDRESS				
CITY-ST-ZIP JUPITER FL 3			1,4 CITY-	, I				
TITLE D		☐ DELETE	2.1 TTLE				Change	☐ Addition
NAME TOMO, JAMES	•		2.2 NAME					
1 '	ROAD NORTH			ET ADDRESS				
			2.4 CITY					
TITLE D		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME WERNTZ, NEL	¢∩N D		3.2 NAME	ĺ		_	_	
	ROAD NORTH			ET ADDRESS			-	
16 100 1777 176 0			3.4. CITY					• '
TITLE JUPITER FL 3	UTUJ	DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM					Į
}				ET ADDRESS				
STREET ADDRESS			4.4 CITY					
CITY-ST-ZIP		☐ DELETE	5.1 TITLE				Change	Addition
		عربي المساور	5.2 NAMI			-		
NAME				ET ADDRESS				ĺ
STREET ADDRESS			5.4 CITY	1				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				Change	Addition
TITLE		☐ occeie	6.2 NAMI				, g-	
NAME STREET ADDRESS				ET ADDRESS				

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

SIGNATURE: