2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9500002271 1. Entity Name HARBOUR POINT TOWNHOMES HOMEOWNERS ASSOCIATION, Principal Place of Business Mailing Address 2251 MONET RD 2251 MONET RD PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410

FILED Mar 29, 2002 8:00 am Secretary of State 03-29-2002 90796 023 ****61.25



Principal Place of Business 3. Mailing Address							-																	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE																
City & State C				City & State			4. FEI N	4. FEI Number 65-0663705			oplied For ot Applicable													
Zip	Country Z			þ	ıntry	5 Certificate of Status Desired			\$8.75 Add	\$8.75 Additional Fee Required														
	6 Name	and Address of Cur-	ent Begieter	ed Agent			7 Name	7. Name and Address of New Registered Agent																
6. Name and Address of Current Registered Agent WIESENECK, PAUL 2237 MONET RD						Name Name																		
						Street Address (P.O. Box Number is Not Acceptable)																		
													-1201 U.S. HWY. ONE, SUITE 36					City				_	== Zin Cod	
													PALM BEACH GARDENS FL 33410						City FL Zip Code					
8. The above	named entit	y submits this stateme	pose of changing its	register	ed office or regi	stered agent, o	or both, in the	state of Florida.																
SIGNATURE																								
	- Signature, typeu	or printed name of registered a	igent and title it ap	pileable. (NOT	_ negisiale	J Agent signature req	Cilied Wile I Temstatil	· · · · · · · · · · · · · · · · · · ·		DATE														
6 Floating Com																								
FILE NOW: FEE IS \$61.25			9. Election Car					Make Check Payable to																
1				Trust Fund Contributi		Oi1.	Added to I	-ees	Department of State															
10. OFFICERS AND DIRECTORS							ADDITIONS	/CHANGES 1	TO OFFICERS AL	ND DIRECTORS IN	110													
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NAME	T	CK, PAUL		- 5000	NAMI																			
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NAME	SOUHARD, JOHN J				NAMI	Ē				_	ì													
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: