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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

Principal Place of Business

CITY-ST-ZIP

SIGNATURE:

N95000003608 (5)

Mailing Address

THE HARBOUR AT JONATHAN'S LANDING HOMEOWNERS' AS SOCIATION, INC.

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1001 NORTH U.S. HIGHWAY ONE 1001 NORTH U.S. HIGHWAY ONE SUITE 407 SUITE 407 JUPITER FL 33477 JUPITER FL 33477-4406 3a. Date of Last Report 3. Date Incorporated or Qualified 07/31/1995 04/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 64-0599597 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Country Yes No 24 29 30 Florida Statutes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WARD, PHILIP H III Street Address (P.O. Box Number is Not Acceptable) 1555 PALM BEACH LAKES BLVD. 83 **SUITE 1000** JUPITER FL 33477 84 Zip Code 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 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 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed hame of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITI F PD ARANYOS, ALEXANDER P NAME 12 NAME 1001 NORTH U.S. HIGHWAY ONE #407 1.3 STREET ADDRESS STREET ADDRESS JUPITER FL 33477 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE MASAITIS, EDWARD A JR 2.2 NAME NAME 1001 NORTH U.S. HIGHWAY ONE #407 STREET ADDRESS 2.3 STREET ADDRESS JUPITER FL 33477 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE KOENIG. PAUL A 3.2 NAME NAME 1001 NORTH U.S. HIGHWAY ONE #407 3.3 STREET ADDRESS STREET ADDRESS JUPITER FL 33477 34. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ___ Change Addition 6.1 TITLE TIRE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Date Date

Daylime Phone # 0044590

14. I do 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 agriculture 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

IN OURSE

FILED Jan 21 1997 8:00am Secretary of State