2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State
04-24-2000 90152 002 ****61.25

DOCUMENT # N96000000324

1. Entity Name

HARBOR LINKS AT GRAND HARBOR PROPERTY OWNERS ASS

Principal Place of Business	Mailing Address
4820 20TH AVE VERO BEACH FL 32967 US	4820 20TH AVE VERO BEACH FL 32967-1511 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0681018 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HEBERLING, L M
4820 20TH AVE
VERO BEACH FL 32967

7. Name and Address of New Registered Agent

Name: RULE, LISA A

Street Address (P.O. Box Number is Not Acceptable): 4820 20TH AVENUE

City: VERO BEACH **FL** Zip Code: 32967

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: Lisa A. Rule LISA A RULE 4-17-2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV TAYLOR, ELBRIDGE M III 4820 20TH AVE VERO BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTS D'HAESELEER, RONALD V 4820 20TH AVE VERO BEACH FL 32967	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SCHLITT, FRANK 4820 20TH AVENUE VERO BEACH, FL 32967	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BYRNE, SUE 2121 GRAND HARBOR BLVD. VERO BEACH FL 32967	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTS BYRNE, SUE 4820 20TH AVENUE VERO BEACH, FL 32967	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M HEBERLING, LYNN M 4820 20TH AVE VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M RULE, LISA A 4820 20TH AVENUE VERO BEACH, FL 32967	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VAN ETTEN, CARL 4820 20TH AVE. VERO BEACH FL 32967	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRUNKER, LES 4820 20TH AVE. VERO BEACH FL 32967	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRUNKER, MARY 4820 20TH AVENUE VERO BEACH, FL 32967	☒ Change ☐ Addition

CR2E037 (9/99)

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: Lisa A. Rule REQUIRED LISA A RULE 4-17-2000 561-778-5943
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #