2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 05, 2006 8:00 am **Secretary of State** DOCUMENT # N96000001510 01-05-2006 90001 005 ****61.25 HARRISON PLACE OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address **102 HARRISON PLACE** 102 HARRISON PLACE 60000046 PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032006 Chg-NP CR2E037 (11/05) Applied For City & State City & State FEI Number 59-3374209 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certilicate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MURPHY, ROYAL Street Address (P.O. Box Number is Not Acceptable) 1417 LUVERNE AVENUE PANAMA CITY, FL 32401 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PD Addition VD TTTLE TITLE 🛛 Delete GAAL, RICK 101 HARRISON PLACE NAME MOORE, PAT NAME 107 HARRISON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32405 CITY-ST-ZIP PANAMA CITY, FL 32405 TTDE ☐ Channe Addition TITLE Delete PRITCHARD, CHUCK NAME JOHN SMALLMAN NAME 118 HARRISON PLACE 102 HARRISON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY, FL 32405 CITY-ST-ZIP PANAMA CITY, FL 3240S SD PATTI WOOD HAM Delete ☐ Change **Addition** TΠ TIBE ANDREWS, BOBBIE NAME NAME 115 HARRISON PLACE STREET ADDRESS 211 HARRISON PLACE STREET ADDRESS CITY-ST-ZIP CRY-ST-7IP PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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CIGNATURE. Charles D. Puthard 1/3/06

NAME

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NAME STREET ADDRESS

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CITY-57-71P

^{12.} I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.