

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007370

1. Entity Name

HARBOR BEACH EXTENSION HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2607 BARBARA DR.
FT. LAUDERDALE FL 33316

2607 BARBARA DR.
FT. LAUDERDALE FL 33316

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 65-0899587

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRACEY, ODILE
2607 BARBARA DR.
FT. LAUDERDALE FL 33316

Name JOY TRIGLIA

Street Address (P.O. Box Number is Not Acceptable)

2624 MARION DR

City

FT LAUD FL

FL

Zip Code

33316

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

Odile Gracy

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 PD
NAME GREGGAINS, ROBERT
STREET ADDRESS 2619 GRACE DR
CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME JONES, WAYNE
STREET ADDRESS 2613 GRACE DR
CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD
NAME GRACEY, ODILE
STREET ADDRESS 2607 BARBARA DR
CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ANDERSON, FLEMING
STREET ADDRESS 2618 BARBARA DRIVE
CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ERDMAN, VIRGINIA
STREET ADDRESS 2523 BARBARA DR
CITY-ST-ZIP FT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME TRIGLIA, JOY
STREET ADDRESS 2624 MARION DRIVE
CITY-ST-ZIP FORT LAUDERDALE FL 33316 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Odile Gracy* **ODILE GRACEY** *Sec. 3/6/02* *954-523-9267*

FILED
Mar 20, 2002 8:00 am
Secretary of State

03-20-2002 90023 003 ****61.25



DO NOT WRITE IN THIS SPACE

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