


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 05, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90185 036 \*\*\*\*61.25

**DOCUMENT # N99000006708**

1. Entity Name  
**PIRATE HARBOR PROPERTY OWNERS' ASSOCIATION, INC.**



Principal Place of Business  
 24200 HENRY MORGAN BLVD  
 PUNTA GORDA, FL 33955

Mailing Address  
 3941 TAMiami TR  
 PMB 106  
 PUNTA GORDA, FL 33950

**66013443**

2. Principal Place of Business - No P.O. Box #  
**24173 HENRY MORGAN BLVD.**

3. Mailing Address  
**NO CHANGE**

Suite, Apt. #, etc.



04252008 Chg-NP CR2E037 (12/06)

City & State  
**PUNTA GORDA, FL**

City & State

Zip  
**33955**

Country  
**USA**

4. FEI Number  
**65-1000040**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MCCULLOCH, DENNIS**  
 24200 HENRY MORGAN BLVD  
 PUNTA GORDA, FL 33955

7. Name and Address of New Registered Agent

Name **ICE, KEN**

Street Address (P.O. Box Number is Not Acceptable)  
**24173 HENRY MORGAN BLVD.**

City **PUNTA GORDA** FL Zip Code **33955**

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 **6-2-08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Filing Fee is **\$81.25** Due by **May 1, 2008**

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

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
P	MCCULLOCH, DENNIS	24200 HENRY MORGAN BLVD	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
VP	DIMUZIO, ROBERT JR	24170 TREASURE ISLAND BLVD	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
S	KERWER, GEORGE	24057 JOLLY ROGER BLVD	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
T	FRAZIER, GALE	24 190 TREASURE ISLAND BLVD	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
D	ICE, KEN	24173 HENRY MORGAN BLVD.	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete
D	KIBURZ, JACK	24206 BUCCANEER BLVD.	PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
P	ICE, KEN	24173 HENRY MORGAN BLVD.	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VP	FLEMING, JOHN HOMER	24343 PIRATE HARBOR BLVD.	PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
S	KIBURZ, NANCY	24206 BUCCANEER BLVD.	PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
T	TAYLOR, GEORGE	24100 TREASURE ISLAND BLVD.	PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	PEARS, DAVID	24343 JEAN LAFITTE BLVD.	PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	KIBURZ, JACK	24206 BUCCANEER BLVD.	PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chap. 617, Florida Statutes, and that my name appears in block 10 or 11, as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **4/27/08** PHONE **941-833-3340**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

ADDITIONAL PAGE TO SHOW CURRENT DIRECTOR

HARRY WAY

ATTACHMENT ↓

66013443

<b>DOCUMENT # N99000006708</b>			
1. Entity Name <b>PIRATE HARBOR PROPERTY OWNERS ASSOCIATION, INC.</b>			
Principal Place of Business 24200 HENRY MORGAN BLVD PUNTA GORDA, FL 33955		Mailing Address 3941 TAMiami TR PHB 106 PUNTA GORDA, FL 33950	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-1000040		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MCCULLOCH, DENNIS 24200 HENRY MORGAN BLVD PUNTA GORDA, FL 33955		Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when resigning)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCULLOCH, DENNIS 24200 HENRY MORGAN BLVD PUNTA GORDA, FL 33955 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAY, HARRY 24207 TREASURE ISLAND BLVD PUNTA GORDA, FL 33955 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIMUZIO, ROBERT JR 24170 TREASURE ISLAND BLVD PUNTA GORDA, FL 33955 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KERWER, GEORGE 24057 JOLLY ROGER BLVD PUNTA GORDA, FL 33955 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FRAZIER, GALE 24 190 TREASURE ISLAND BLVD PUNTA GORDA, FL 33955 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ICE, KEN 24173 HENRY MORGAN BLVD. PUNTA GORDA, FL 33955 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KURZ, JACK 24206 BUCCANEER BLVD. PUNTA GORDA, FL 33955 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: 		Date: 4-22-08 941533-3340 Daytime Phone #	