## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## P92000013200 (0) DOCUMENT # 1. Corporation Name

THE HARBOR GROUP MANAGEMENT CORPORATION

,					
Principal Plac	ce of Business	Mailing Address	· <u></u>		
210 BRANT I	ROAD	P.O. BOX 14823			
57		SUITE 4A		DO NOT MIDITE IN YOU	10 0D 4 0 E
Lake Park FL <b>334</b> 03   US		NORTH PALM BEACH FL 33408 US		DO NOT WRITE IN THIS SPACE	
03		ųs		3. Date Incorporated or Qualified 12/21/1992	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	Hymminusias way	26 PO BOX 148	3	65-0376048	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			\$8.75 Additional
22	(A	27	_	5. Certificate of Status Desired	Fee Required
City & Stat		City & State	BONH FL	6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	1+ Palm Berneth FC. Country	Zip Zip	Country	Trust Fund Contribution	Added to Fees
24 334	(08 <sub>25</sub> u.5	<u>⊢</u> – – – – – – – – – – – – – – – – – – –	50 L S	<ol> <li>This corporation owes or has paid the operation of the personal Property Tax due June 30.</li> </ol>	current year Intangible  Yes No
-	9. Name and Address of Current	<u> </u>	<del>//</del>	10, Name and Address of New Registere	
SI	MITH, JOHN W		81 Name		
ſ	3 HUMMINGBIRD WAY		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 4A				Jiess (F.O. Box Number is Not Acceptable)	
NO.	ORTH PALM BEACH FL 33408		83		
ł			84 City		85 Zip Code
				F	
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statutes l'Horida, Such change was au	s, the above-named con thorized by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered in projected
agent. i a	am familiar with, and accept the obligati	ons of, Section 607.0505, Flor	ida Statutes.	and to be an endertered the reply the copy the	ppoint of the object of
SIGNATURE	Signature, typed or printed name of registered agent	4077			
12.	OFFICERS AND		Registered Agent signature req.	Jed whon reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	ABOTTO TO OTTO DATE	Change Addition
NAME	SMITH, CHERYL A		1.2 NAME		
STREET ADDRESS	813 HUMMINGBIRD WAY, 4A		1.3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BEACH FL		1.4 CITY - ST - ZIP		
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	SMITH, JOHN W.		2 2 NAMÉ		
STREET ADDRESS	813 HUMMINGBIRD WAY, 4A		2 3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BEACH FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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 signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 3/30/98 SIGNATURE: TOUR

56/8637/21

**FILED** 

Apr 06 1998 8:00am

Secretary of State