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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000050900 (8)

1. Corporation Name

HARBOR ISLANDS REALTY, INC.

Principal Place of Business

255 ALHAMBRA CIRCLE, 8th FL
CORAL GABLES, FL 33134

Mailing Address

P.O. BOX 526000
MIAMI, FL 33152

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

KERRIGAN, JUANITA I.
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

81 Name

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

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of signature

NOTE: Block and Agents shall be signed when not using

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD MCNAIRY, CHARLES L.
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VD GETMAN, DENNIS J.
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VSD KERRIGAN, JUANITA I.
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

T SOPSHIN, JEFFREY
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V ZOBERMAN, NORMAN
255 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

70000185294

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***208.75

SIGNATURE: By: Juanita I. Kerrigan Secretary/VPI

4/30/96

(303) 442-7000

CR2E034 (12/95)