## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

1. Corporation Name

P95000068395 (9)

HARBOR PARK, INC.

HANDUN	PARN, INC.									
Principal Place of	Busness	Mailir	ng Address				I DEDINOON AND NOON TAKA BOKIN OO	(II <b>88</b> 111 <b>58</b> 11		filito iditoi diffi idol
4625 E BAY DRIVE SUITE 201 CLEARWATER FL 34624			25 E BAY DRIVE LEARWATER FL 3			ļ				
							3. Date incorporated or Qualified 08/31/1995	3a. Da	ate of Last	Report
2. Principal Place 21	of Business	2a. M	failing Address				4. FEI Number 59-3335/	9		Applied For
Suite, Apt. #, e	to		iuite, Apt #, etc.				51-55551	<u> </u>	<u> </u>	Not Applicable
22		27		****			5. Certificate of Status Desired			75 Additional e Required
Oity & State		28	ity & State				Election Campaign Financing     Trust Fund Contribution			00 May Be
Ζφ	Country	7	ıp	Coun	try		8. This corporation has liability for			s 199.032,
24]	25	29		30				s 🔲 No		
	Name and Address of Cu	irrent Hegister	red Agent		1 Nam	<del>_</del>	10. Name and Address of New	Registere	d Agent	
TW/ED 00	OTT 1				II Nam	ie				
TYLER, SC	Y DRIVE SUITE 201			1	Stree	at Address	s (P.O. Box Number is Not Accepta	ble)		
	TER FL 34624			ī	13					***************************************
				-	4 City				. 85 2	Zip Code
aa ei					1 1			F	LII	·
or registered a	agent, or both, in the State of I	Florida. Such ci	nange was autho	rized by the cr	e-named rooration	corporation	on submits this statement for the pu of directors. I hereby accept the app	irpose of c	changing its	s registered office
familiar with, a	and accept the obligations of,	Section 607.05	05, Florida Statut	es.					us . 0 g. 0 to . 0	zo again. Turr
SIGNATURE	at well typied or printed damie of registered	present and little it are I	he akts	(NOTE Registered A						
12.		AND DIRECTO		13.	geni signaro	re required wi	ADDITIONS/CHANGES TO OF	DATE	UR MIDECT	CODE IN 10
TITLE TO	D	Jan 10 Jan 12 Ja	DELETE	1.1 ]]]		T	ADDITIONS/CHANGES TO OF	ICERS AL	Change	<del></del>
NAME	TYLER, SCOTT J			1 2 NAM		731	er, Scott J			
STREET ADDRESS	4625 E BAY DRIVE SUIT	F 201			ET ADDRES	عاد اء	56 Suber De			
OCY SE-ZP	CLEARWATER FL 34624	L 201			- ST - ZIP		earwater, FL	•		
TILE	<u> </u>		☐ DELETE	2 1 101		D)	ear marier, r =		Change	e 🔀 Addition
NAME			_	2 2 NAM			Ler, Craig H.			7,000,000
STREET ADDRESS					ET ADDRES	s   d	Marina Terrac	P		
CHY SI-ZIP					- ST - 71P		easure Island,			
THE		· · · · · · · · · · · · · · · · · · ·	DELETE	3 1 T/T		15	exsere = siand,	T 1	☐ Change	Addition
NAM:				3 2 NAN	IF	TV	IER, Timothy	<b>T</b> .		<b>23</b>
STREET ADDRESS				3 3. \$1F	EET ADDRES		Bellevue DR.	1 ,		
CHY S1-7IP					-\$1-ZIP		easure Island	. FL		
Title			DELETE	4.1 ](1)		<del>-   · · ·</del>	0.3010	- 1	Change	e
NAME				4.2 NAN	ΙE				_ ,	
STREET ADDRESS				4.3 STR	ET ADDRES	is				
CITY-S1 ZIF					-ST-ZIP					
MILE			DELETE	5. 1 TiTi	.E				Change	Addition
NAME				5 2 NAM	ė					_
STREET ALCRESS				53STR	ET ADDRES	s				
CHTY-ST-ZIF				5 4 CITY	- ST - ZIP					
TIFLE			☐ DELETE	6 1 TIT					Change	Addition
NAME				6 2 NAM	E				•	_
STREET ADORESS				6.3 STH	ET ADDRES	s.				
City St-ZiP		,			- ST - ZIP					
14. I do hereby ce	ertify that the information suppl	lied with this file	og is voluntarily fo			rualify for (	the exemption stated in Section 110	07/2)/(4)	Clasida Ctat	dan 15 db a

. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 oath; that I am an officer or director of the top poration 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 chapter or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.24.96

536.5588

CR2F034