**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600060211

1. Corporation Name GREAT HARBOUR MANAGEMENT, INC.						
Principal Place of Business Ma		Mailing Address		I (BOILLEN) IN TOTAL ORIGINAL CONTROL	18 <b>6</b> 1111 #0110 11001 1	.[984 1181 1884
2900 HIGH RIDG BOYNTON BEAC	- · · · <del>-</del>	2900 HIGH RIDGE RD BOYNTON BEACH FL 33426			IS SPACE	
				3. Date Incorporated or Qualifed 07/17/1996		
2. Principal Pl	ace of Business	2a. Mailing Address	<u></u>	4. FEI Number	<u> </u>	plied For
21	سند ، د سند	26	. **	65-0695160		Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	* <b>\$8.75</b> A Fee Red	
City & State	9	City & State	0.5	6. Election Campaign Financing Trust Fund Contribution	\$5.00 ( Added to	
Zip	Country	<b>28</b>	Country	8. This corporation owes the current year I		
24	25	<u></u> ⊢ :	30	Personal Property Tax.		□No
[24]	9. Name and Address of Current			10. Name and Address of New Registere	d Agent	
81 Name from Towns						
Fení	DER, MARCUS C		82 Street A	IM FENDER_ Address (P.O. Box Number is Not Acceptable)		
7 FAYETTE DR			3900	HIGH RIDGE ROAD		
OCEAN RIDGE FL 33435			83			
			84 City-	YNTIN BEACH F	L 85 Zip C	762
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.  4-26-99						
SIGNATURE    Signature, typed or printed name of printed agent and title if applicable (NOTE: Registered Agent signature re				quired when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE	P,D,T	<b></b> ☐ Change	Addition
NAME	FENDER, MARCUS C		1.2 NAME	MARCUS C. FENDER CORIVE		
STREET ADDRESS	7 FAYETTE DR		1.3 STREET ADDRESS	713 SE ATLANTICON		
CITY-ST-ZIP	OCEAN RIDGE FL 33435		1.4 CITY-ST-ZIP	LANTANA, FZ 33462		
TITLE	D	□ DELETE	2.1 TITLE	5, D	<b>€</b> hange	☐ Addition
NAME	FENDER, KIM E		2.2 NAME	KIM E. FENDER		
STREET ADDRESS	2900 HIGH RIDGE RD.	· <del>-</del> ·	2.3 STREET ADDRESS	IS DOGWOOD CIRCLE.		
CITY-ST-ZIP	BOYNTÉN BEACH FL		2. 4 CITY-ST-ZIP	BOYNTON BEACH, FZ 33462		
TITLE	\$	<b>☑</b> DELETE	3.1 TITLE		Change	Addition
NAME	FENDER, TIRREL D II		3.2 NAME		ŕ	
STREET ADDRESS	2900 HIGH RIDGE RD		3.3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 (9.07(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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

☐ DELETE

Change

Change

Addition

☐ Addition

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90190 005 \*\*\*150.00