

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P980000037569

1. Corporation Name

HARBORSIDE REALTY, INC.
24324 PIRATE HARBOR BLVD.
PUNTA GORDA, FL 33955

Principal Place of Business

Mailing Address

24324 PIRATE HARBOR BLVD.
PUNTA GORDA, FL 33955

2. Principal Place of Business

21 24324 PIRATE HARBOR BLVD

2a. Mailing Address

26 24324 PIRATE HARBOR BLVD

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23 Punta GORDA, FL

28 Punta GORDA, FL

Zip

Country

Zip

Country

24 33955

25 USA

29 33955

30 USA

9. Name and Address of Current Registered Agent

GEORGE M. DYKSTRA
24324 PIRATE HARBOR BLVD.
PUNTA GORDA, FL 33955

81 Name

SAME

82 Street Address (P.O. Box Number, if Not Applicable)

83

84 City

FL 85 Zip Code

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 GEORGE M. DYKSTRA

George M. Dykstra

3/15/99

Date

12. OFFICERS AND DIRECTORS

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [Change] [X] Add

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

15 TITLE [Change] [Add]

16 NAME

17 STREET ADDRESS

18 CITY-ST-ZIP

19 TITLE [Change] [Add]

20 NAME

21 STREET ADDRESS

22 CITY-ST-ZIP

23 TITLE [Change] [Add]

24 NAME

25 STREET ADDRESS

26 CITY-ST-ZIP

27 TITLE [Change] [Add]

28 NAME

29 STREET ADDRESS

30 CITY-ST-ZIP

31 TITLE [Change] [Add]

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

35 TITLE [Change] [Add]

36 NAME

37 STREET ADDRESS

38 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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.

SIGNATURE: GEORGE M. DYKSTRA

3/15/99 941-549-0046

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR

English-Print

CR2E034 (*198)

FILED

99 MAR 22 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date for Corporate Fee Due (Month/Day/Year)

04/23/1998

4. FEE Number

Applied For

X Not Applicable

\$8.75 Additional

Fee Required

5. Certificate of Status Desired []

6. Election Campaign Financing []

Trust Fund Contribution []

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax []

[] Yes

X No

10. Name and Address of New Registered Agent