## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT** #

P98000099696



**FILED** Feb 27, 2003 8:00 am Secretary of State

HARB	OUR VILLAGE REALTY	CORPORATIO				02-27-2003 9	-	150.00
4620 SOL	Il Place of Business JTH ATLANTIC AVENUE NLET FL 32127	4620 \$	ng Address South Atlantic Av E Inlet Fl 32127	/ENUE				
2. Princi	pal Place of Business	3. Mai	ing Address					
Suite,	Suite, Apt. #, etc. City & State		Althon Apro #; etc.					
City &			City & State			4. FEI Number FO.2570044 Applied Fo.		
Zip	Country	Zip		Country		59-3570244		Not Applicat
	6. Name and Address of	of Current Registered	Agent	<del></del>		5. Certificate of Status Desired	Fee R	5 Additional equired
	The second second			_Name	e. O =	7. Name and Address of New Ro	egistered Agent	
	IAN, RICHARD A				ET	ER B. HEEBA	ĴĒR	
	OUTH ATLANTIC AVENUE			Street	t Address (P.	O. Box Number is Not Acceptable)	)	
PUNCE	INLET FL 32127				523	NORTH HALIFAX	AUF	
9 Thomb		<del></del>		City	DAUT	ONA BEACH	FL Zig	Code
the obli	ove named entity submits this sta gations of registered agent	atement for the purpos	se of changing its re	gistered office	or registered	ONA SEACH agent, or both, in the State of Flori	ide Lemberri	3 <u>2118</u>
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SIGNATUR	E -/ //W	5 1				0 0	1 - 4 -	
	Signature, typed or printed name of roots					/~/		
	Signature, typed or printed name of regit	_	able. (NOTE: R	Registered Agent sign	nature required wh	en reinstating)	1-03 DATE	<del></del>
∳ Af	FILE NOW!!! FEE IS \$150	0.00	able. (NOTE: R	Registered Agent sign	nature required wh	en reinstating)	DATE -	
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12 indicated on this report or supplemental 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 changed, or on an attachment with an address, with all other like empowered.

CNATION

CNATIO

SIGNATURE:

CHARCO REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

386-767-1313