

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V48607 (8)

1. Corporation Name

HARBOUR VENTURES TWO, INC.



Principal Place of Business

420 KNIGHTS RUN AVE.
TAMPA FL 33602

Mailing Address

420 KNIGHTS RUN AVE.
TAMPA FL 33602

2. Principal Place of Business

21 800 S. Harbour Island Blvd

2a. Mailing Address

26 800 S. Harbour Island Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

24

Zip

Country

29

30

9. Name and Address of Current Registered Agent

FURTADO, DONALD A
420 KNIGHTS RUN AVENUE
TAMPA FL 33602

3. Date Incorporated or Qualified

07/08/1992

3a. Date of Last Report

04/13/1995

4. FET Number

59-3133234

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

800 S. Harbour Island Blvd

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Donald A. Furtado

Donald A. Furtado

4/29/96

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

DP

NAME

HARVEY, THOMAS H III

STREET ADDRESS

420 KNIGHTS RUN AVE

CITY-ST-ZIP

TAMPA FL

TITLE

DVS

NAME

FURTADO, DONALD A

STREET ADDRESS

420 KNIGHTS RUN AVE

CITY-ST-ZIP

TAMPA FL

TITLE

S

NAME

BULLARD, SANDRA S

STREET ADDRESS

420 KNIGHTS RUN AVE

CITY-ST-ZIP

TAMPA FL

TITLE

S

NAME

WOODBURY, MARK

STREET ADDRESS

420 KNIGHTS RUN AVE

CITY-ST-ZIP

TAMPA FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

800 S. Harbour Island Blvd

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

800 S. Harbour Island Blvd

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Woodbury Mark
800 S. Harbour Island Blvd

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5
FURTADO, JANE G.
800 S. HARBOUR ISL. BLVD
TAMPA, FL 33602

☐ Change ☒ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6
HARVEY, FLORENCE
800 S. HARBOUR ISL. BLVD
TAMPA, FL 33602

☐ Change ☒ Addition

14. 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 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.

SIGNATURE:

John Harvey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

(813) 202 1872

DATE

Daytime Phone #

CR2E034 (12/95)