

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

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

99 JUL 26 PM 1:31

1. Corporation Name
THE HARBOUR CENTER, INC.

Principal Place of Business	Mailing Address
2401 PGA BLVD	2401 PGA BLVD
280	280
PALM BEACH GARDENS FL 33410	PALM BEACH GARDENS FL 33410
US	US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

3. Date Incorporated or Qualified 08/28/1992			
4. FEI Number 65-0354883	<table border="1"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	Applied For	Not Applicable
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 owes the current year Inangible Personal Property Tax. ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent

JAYNE REGISTER BARKDULL
C/O LEVY, KNEEN, BOYES, WIENER
1400 CENTREPARK BLVD. # 1000
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent			
81	Name David J. Wiener		
82	Street Address (P.O. Box Number is Not Acceptable) 2401 PGA Boulevard		
83	Suite 280		
84	City Palm Beach Gardens	FL	85 Zip Code 33410

14 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

~~David L. Miller~~ Registered Agent. Registered Agent signature required when remitting.

DAYE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P PRESTON, JOHN 12520 SEMINOLE BEACH RD. N. PALM BEACH FL	☐ DELETE	1.1 TITLE DP ☒ Change ☐ Addition
STREET ADDRESS			1.2 NAME
CITY-ST-ZIP			1.3 STREET ADDRESS 2401 PGA Boulevard, Suite 280
			1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410
NAME	V COHEN, PETER 32 FIFESHIRE DR. WILLOWDALE, ONT, CAN	☐ DELETE	2.1 TITLE D ☒ Change ☐ Addition
STREET ADDRESS			2.2 NAME
CITY-ST-ZIP			2.3 STREET ADDRESS 2851 JOHN STREET, SUITE ONE
			2.4 CITY-ST-ZIP MARKHAM, ONTARIO CANADA L3R5R7
	S GREEN, ROBERT 8 WEBSTER AVE., STE 3 TORONTO, ONT., CAN.	☐ DELETE	3.1 TITLE VPST ☒ Change ☐ Addition
STREET ADDRESS			3.2 NAME
CITY-ST-ZIP			3.3 STREET ADDRESS 2851 JOHN STREET, SUITE ONE
			3.4 CITY-ST-ZIP MARKHAM, ONTARIO, CANADA L3R5R7
		☐ DELETE	4.1 TITLE DVPAS ☐ Change ☒ Addition
STREET ADDRESS			4.2 NAME BERNICK, LARRY
CITY-ST-ZIP			4.3 STREET ADDRESS 2401 PGA BOULEVARD, SUITE 280
			4.4 CITY-ST-ZIP PALM BEACH GARDENS, FL 33410
NAME		☐ DELETE	5.1 TITLE AS ☐ Change ☒ Addition
STREET ADDRESS			5.2 NAME WIENER, DAVID J.
CITY-ST-ZIP			5.3 STREET ADDRESS 2401 PGA BOULEVARD, SUITE 280
			5.4 CITY-ST-ZIP PALM BEACH GARDENS, FL 33410
		☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
ADDRESS			6.2 NAME
CITY-ST-ZIP			6.3 STREET ADDRESS
			6.4 CITY-ST-ZIP

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

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Harry Barnick Vice President

Date _____

Daytime Program 6