

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **403134** (0)

1. Corporation Name
TWIN SHORES, INC.



Principal Place of Business: **3740 GULF OF MEXICO DR. LONGBOAT KEY FL 34228-2709**
Mailing Address: **3740 GULF OF MEXICO DR. LONGBOAT KEY FL 34228-2709**

3. Date Incorporated or Qualified: **06/13/1972**
3a. Date of Last Report: **03/15/1995**
4. FEI Number: **59-1414446**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
Suite, Apt. #, etc.:
City & State:
Zip: Country:

9. Name and Address of Current Registered Agent

**HAMMOND, RICHARD W.
3740 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228-2709**

10. Name and Address of New Registered Agent
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83. City:
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and Director(s) (2001) Registered Agent's position and dates in office

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: STD	<input type="checkbox"/> DELETE	1.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: HAMMOND, RICHARD W		1.2 NAME:	
STREET ADDRESS: 22307 HALBURTON RD. BEACHWOOD OH		1.3 STREET ADDRESS:	
CITY- ST- ZIP:		1.4 CITY- ST- ZIP:	
TITLE: PD	<input type="checkbox"/> DELETE	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: HAMMOND, JUDITH		2.2 NAME:	
STREET ADDRESS: 22307 HALBURTON RD BEACHWOOD, OH 00000		2.3 STREET ADDRESS:	
CITY- ST- ZIP:		2.4 CITY- ST- ZIP:	
TITLE: VD	<input type="checkbox"/> DELETE	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: BAILEY, ELIZABETH		3.2 NAME:	
STREET ADDRESS: 2896 WOODBURY RD. SHAKER HEIGHTS OH		3.3 STREET ADDRESS:	
CITY- ST- ZIP:		3.4 CITY- ST- ZIP:	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY- ST- ZIP:		4.4 CITY- ST- ZIP:	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY- ST- ZIP:		5.4 CITY- ST- ZIP:	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY- ST- ZIP:		6.4 CITY- ST- ZIP:	

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: *Judith A. Hammond*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96 (941) 303-1646

CR2E034 (12/95)