

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 707621 (9)

1. Corporation Name

THE SHORES CONDOMINIUM, INC.



Principal Place of Business

Mailing Address

1700 NORTHEAST 105TH STREET
MIAMI SHORES FL 33138

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MIAMI SHORES FL 33138

3. Date Incorporated or Qualified

07/21/1964

3a. Date of Last Report

06/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-1095398

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POLIAKOFF, GARY A.
6520 N. ANDREWS AVENUE
FT. LAUDERDALE FL 33310-6057

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME THORNTON, RICHARD J
STREET ADDRESS 1700 N E 105TH ST
CITY-ST-ZIP MIAMI SHORES FL DELETE

11 TITLE P
12 NAME CHARLES J. MENNES Change Addition
13 STREET ADDRESS 1700 N.E. 105 Street
14 CITY-ST-ZIP MIAMI SHORES, FL. 33138

TITLE V
NAME WIGHTMAN, WILLIAM
STREET ADDRESS 1700 N.E. 105TH STREET
CITY-ST-ZIP MIAMI SHORES FL DELETE

21 TITLE V
22 NAME G. Ann Nunnally Change Addition
23 STREET ADDRESS 1700 N.E. 105 Street
24 CITY-ST-ZIP MIAMI SHORES, FL. 33138

TITLE ST
NAME JENKINS, MARGARET M
STREET ADDRESS 1700 N E 105TH ST
CITY-ST-ZIP MIAMI SHORES FL DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP Change Addition

TITLE AST
NAME NUNNALLY, G. ANN
STREET ADDRESS 1700 N.E. 105TH ST.
CITY-ST-ZIP MIAMI SHORES FL DELETE

41 TITLE AST
42 NAME STANLEY DRILLICK Change Addition
43 STREET ADDRESS 1700 N.E. 105 STREET
44 CITY-ST-ZIP MIAMI SHORES, FL. 33138

TITLE AST
NAME MENNES, CHARLES J
STREET ADDRESS 1700 NE 105 ST
CITY-ST-ZIP MIAMI SHORES FL DELETE

51 TITLE AST
52 NAME LAURA McCAUGHAN Change Addition
53 STREET ADDRESS 1700 N.E. 105 STREET
54 CITY-ST-ZIP MIAMI SHORES, FL. 33138

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *G. Ann Nunnally*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
G. ANN NUNNALLY

3-1-3-96 893-6741
Date Daytime Phone #

CR2E037 (12/95)