

FILE NOW: FILING FEE IS \$61.25

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Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **715392** (7)

1. Corporation Name

THE SHORE VIEW ASSOCIATION, INC.



Principal Place of Business 1819 SHORE DRIVE SOUTH SOUTH PASADENA FL 33707	Mailing Address 1819 SHORE DRIVE SOUTH SOUTH PASADENA FL 33707-4704
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3. Date Incorporated or Qualified 10/09/1968	3a. Date of Last Report 04/01/1996
4. FEI Number 59-1278151	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	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STOUT, HARRY
1819 SHORE DRIVE, SOUTH
SUITE 318
SOUTH PASADENA FL 33707**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	STOUT, HARRY	
STREET ADDRESS	1819 SHORE DRIVE SOUTH, #316	
CITY-ST-ZIP	SOUTH PASADENA FL 33707	
TITLE	VPD	☐ DELETE
NAME	HERNANDEZ, PAULA	
STREET ADDRESS	1819 SHORE DRIVE SOUTH, #103	
CITY-ST-ZIP	SOUTH PASADENA FL 33707	
TITLE	VPD	☒ DELETE
NAME	BRENERMAN, KEN	
STREET ADDRESS	1819 SHORE DR, S #214	
CITY-ST-ZIP	SOUTH PASADENA FL 33707	
TITLE	SD	☒ DELETE
NAME	FOURDE, RALPH	
STREET ADDRESS	1819 SHORE DR, S #107	
CITY-ST-ZIP	SOUTH PASADENA FL 33707	
TITLE	TD	☐ DELETE
NAME	HART, BARBARA	
STREET ADDRESS	1819 SHORE DR, S. #206	
CITY-ST-ZIP	SOUTH PASADENA, FL 00000 33707	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	VPD Douglas Tucker
3.3 STREET ADDRESS	1819 Shore Dr S # 318
3.4 CITY-ST-ZIP	South Pasadena, FL 33707
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	SD Barbara Stahl
4.3 STREET ADDRESS	1819 Shore Dr S #218
4.4 CITY-ST-ZIP	South Pasadena, FL 33707
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *[Signature]* DATE: *4/16/97*

CR2E037 (9/96)