2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 8:00 am
Secretary of State
03-29-2004 90085 047 ****61.25

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DOCUMENT # 715392

1. Entity Name
THE SHORE VIEW ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1819 SHORE DRIVE SOUTH SOUTH PASADENA, FL 33707	250 104TH AVE SAINT PETERSBURG, FL 33706

01072004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1278151 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LAMONT, SUE 250 104TH AVENUE SAINT PETERSBURG, FL 33706	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STOUT, HARRY 1819 SHORE DRIVE SOUTH, #316 SOUTH PASADENA, FL	☒ Delete	PD DUFFEY, ROBERT 1819 SHORE DR.S. #111 SO. PASADENA, FL 33707	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HERNANDEZ, PAULA 1819 SHORE DRIVE SOUTH, #103 SOUTH PASADENA, FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SMACC, ROB 1819 SHORE DRIVE S #217 SOUTH PASADENA, FL	☒ Delete	VPD ERIKSON, SANDRA 1819 SHORE DR.S. #207 SO. PASADENA, FL 33707	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HART, BARBARA 1819 SHORE DR.,S. #206 SOUTH PASADENA, FL 00000,	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CIANCIULLI, RON 1819 SHORE DR S #105 SAINT PETERSBURG, FL 33707	☒ Delete	SD TAYLOR, GEORGE 1819 SHORE DR.S. #102 SO. PASADENA, FL 33707	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara H Hart Barbara H Hart 2/12/04 727 347-1801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #