

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90022 003 \*\*\*\*61.25

<b>DOCUMENT # 715393</b> 1. Entity Name <b>SHORE TOWERS BUILDING OF TOWN APARTMENTS SOUTH NO. 103, INC., A CONDOMINIUM</b>					
Principal Place of Business <b>1868 SHORE DRIVE SOUTH SOUTH PASADENA, FL 33707</b>				Mailing Address <b>1868 SHORE DRIVE SOUTH SOUTH PASADENA, FL 33707</b>	
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 <b>59-1292883</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>YANOW, HAROLD 1868 SHORE DR SOUTH APT 614 SOUTH PASADENA, FL 33707</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when changing)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PORTER, FRANK		NAME		
STREET ADDRESS	1868 SHORE DRIVE SOUTH SOUTH #102		STREET ADDRESS		
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DALLMS, DAVID		NAME		
STREET ADDRESS	1868 SHORE DR S, #607		STREET ADDRESS		
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KORBELAK, JOHN		NAME		
STREET ADDRESS	1868 SHORE DR S, #514		STREET ADDRESS		
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LANDIS, JANE		NAME	PEG JOHNSTON	
STREET ADDRESS	1868 SHORE DRIVE SOUTH #410		STREET ADDRESS	1868 Shore Drive So #310	
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP	SO PASADENA FL 33707	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANDERSON, C. SANDERS		NAME		
STREET ADDRESS	1868 SHORE DR S, #201		STREET ADDRESS		
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	DT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YANOW, HAROLD		NAME		
STREET ADDRESS	1868 SHORE DRIVE SOUTH #614		STREET ADDRESS		
CITY-ST-ZIP	SOUTH PASADENA, FL 33707		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
<b>SIGNATURE:</b>			<b>FRANK PORTER</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			2/14/06 727 3460603 <small>Date Daytime Phone</small>		