

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 # 729599 (1)

1. Corporation Name

SHADY DELL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3135 SHADY DELL LN. BOX 152
MELBOURNE FL 32935**

**3135 SHADY DELL LN. BOX 152
MELBOURNE FL 32935**



100001832181
-05/21/96--01054--036
***61.25

3. Date Incorporated or Qualified
05/01/1974

3a. Date of Last Report
02/15/1995

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

4. FEI Number
59-1586900

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

**BROOKS, NANCY A.
3135 SHADY DELL LANE, #222
MELBOURNE FL 32935**

81 Name **ELIZABETH A. FORD**
82 Street Address (P.O. Box Number is Not Acceptable)
3135 SHADY DELL LANE
83 **UNIT #104**
84 City **MELBOURNE** **FL** 85 Zip Code **32935**

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 **ELIZABETH A. FORD, TREAS.**

Signature, typed or printed name of registered agent and title if applicable.

(NOT Registered Agent signature required when reinstating)

DATE **4-10-96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD	XX DELETE
NAME	BLOOMQUIST, HARRY	
STREET ADDRESS	3135 SHADY DELL LANE #208	
CITY - ST - ZIP	MELBOURNE, FL 00000	
TITLE	SD	☐ DELETE
NAME	JENRY, JACK	
STREET ADDRESS	3135 SHADY NELL LANE #108	
CITY - ST - ZIP	MELBOURNE, FL 00000	
TITLE	D	XX DELETE
NAME	FULLER, KENNETH E.	
STREET ADDRESS	3135 SHADY DELL LN #115	
CITY - ST - ZIP	MELBOURNE, FL 00000	
TITLE	PD	XX DELETE
NAME	WAGNER, GEORGE	
STREET ADDRESS	3135 SHADY DELL LN #218	
CITY - ST - ZIP	MELBOURNE, FL 00000	
TITLE	D	XX DELETE
NAME	MCCLUCKIE, WILLIAM	
STREET ADDRESS	3135 SHADY DELL LN #224	
CITY - ST - ZIP	MELBOURNE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	EDWARD BARBOUR	
1.3 STREET ADDRESS	3135 SHADY DELL LA. #114	
1.4 CITY - ST - ZIP	MELBOURNE, FL 32935	
2.1 TITLE	D	XX Change ☐ Addition
2.2 NAME	JACK HENRY	
2.3 STREET ADDRESS	3135 SHADY DELL LA. #108	
2.4 CITY - ST - ZIP	MELBOURNE FL 32935	
3.1 TITLE	D	☐ Change ☒ Addition
3.2 NAME	RICHARD SCANLON	
3.3 STREET ADDRESS	3135 SHADY DELL LA. #204	
3.4 CITY - ST - ZIP	MELBOURNE, FL 32935	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	ALBERT D'ANGELO	
4.3 STREET ADDRESS	3135 SHADY DELL LA. #203	
4.4 CITY - ST - ZIP	MELBOURNE, FL 32935	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	ELIZABETH A. FORD	
5.3 STREET ADDRESS	3135 SHADY DELL LA. #104	
5.4 CITY - ST - ZIP	MELBOURNE FL 32935	
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 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:

EDWARD BARBOUR, PRES. 4-10-96 (407-255-4606)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)