FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 FEB 17 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 735425 (1)

1. Corporation Name
THE SHUTTERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
155 YACHT CLUB DR. NO. PALM BEACH FL 33408	155 YACHT CLUB DR. NO. PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/30/1976
3a. Date of Last Report: 02/11/1994
4. FEI Number: 59-1833567 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

NOTE, JOHN H. VAN NO
155 YACHT CLUB DR
#106
N PALM BCH FL 33408

10. Name and Address of New Registered Agent

81 Name: Gagliardi, Vincent J
82 Street Address (P.O. Box Number is Not Acceptable): 155 Yacht Club Drive 306
83
84 City: N Palm Beach FL 85 Zip Code: 33408

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Vincent J Gagliardi — Vincent J Gagliardi — 2/13/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	TD
NAME	MIDDLETON, ROSE
STREET ADDRESS	155 YACHT CLUB DRIVE
CITY-ST-ZIP	N PALM BEACH, FL 00000
TITLE	PD
NAME	NOTE, JOHN H. JR.
STREET ADDRESS	155 YACHT CLUB DR, #106
CITY-ST-ZIP	N PALM BEACH, FL 00000
TITLE	SD
NAME	RISSO, ELLA
STREET ADDRESS	155 YACHT CLUB DR
CITY-ST-ZIP	N PALM BEACH, FL 00000
TITLE	VP
NAME	BROWN, CLAUDE
STREET ADDRESS	155 YACHT CLUB DR #105
CITY-ST-ZIP	N PALM BEACH, FL 00000
TITLE	AS
NAME	MOUNT, MILDRED
STREET ADDRESS	155 YACHT CLUB DRIVE
CITY-ST-ZIP	N PALM BEACH, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	PD Gagliardi, Vincent J 155 Yacht Club Dr. # 306 N. Palm Bch, Fl. 33408	☒ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S D Mount, Mildred 155 Yacjt Club Dr. # 406 N. Palm Bch, Fl. 33408	☒ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	V P. Walne, Gilbert 155 Yacht Club # 202 N. Palm Bch, Fl 33408	☒ Change ☐ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	A S. Koen, Charlotte 155 Yacht Club Dr # 206 N. Palm Bch Fl 33408	☒ Change ☐ Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 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: Vincent J. Gagliardi — Vincent J Gagliardi — 407-622-8281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
2/13/95

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