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Mar 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 750447 (5)

1. Corporation Name
SYLVAN SHORES TAXPAYERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
P.O. BOX 1343 LAKE PLACID FL 33852-8343 P.O. BOX 1343 LAKE PLACID FL 33862-1343

3. Date Incorporated or Qualified 12/31/1979 3a. Date of Last Report 03/20/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2277185 Applied For Not Applicable
22 Suite, Apt #, etc. 27 Suite, Apt #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required
23 City & State 28 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
24 Zip Country 25 Country 29 Zip Country 30 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

GARDNER, FRANK
1802 SYLVIA STREET
LAKE PLACID FL 33852

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

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include names and addresses of Linda Shields, Frank Gardner, Myrtle Lusk, Joseph Berg, Anita Bergeron, Dan Long, William Trego, Sylvia Fisher, Laverne Jones, Louis Maynard, and John Belcik.

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: Frank Gardner REQUIRE GARDNER 3/2/97 941-465-7467
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0064134

CR2E037 (9/96)