FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 15, 1999 8:00 am Secretary of State

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1. Corporation Name

SHARILEA CONDOMINIUM ASSOCIATION, INC

SHANILI	EX COMPONINION ASSOCI	IATION, INO.							•	
Principal Place	e of Business	Mailing Address								
Principal Place of Business Mailing Address 141 ISLE OF VENICE CONDO 5-A 141 ISLE OF VENICE STE. 5A FT LAUDERDALE FL 33301 US Mailing Address 141 ISLE OF VENICE STE. 5A FT. LAUDERDALE FL 33301 US			3301							
⊢ '	Place of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 05/19/1980		•		
Suite, Apt.	# etc	Suite, Apt. #, etc.				4. FEI Number		Apr	olied For	
22	<i>π</i> , σ.σ.	27				NOT APPLICABLE		A	Applicable	
City & State	te .	City & State				5. Certifcate of Status Desired	o ·	\$8.75 A	-	
Zip	Country	Zip	Co.	untry		Election Campaign Financing Trust Fund Contribution		\$5.00 P		
24	9. Name and Address of Curren	29 nt Registered Agent	[30]	τ -		10. Name and Address of New Re	gistered /			
	Tanto and Padigos of Salisin			81	Name					
EDWARDS, JULIO F/LESORS M				82	Street Addre	ss (P.O. Box Number is Not Acceptab	е)			
1	OF VENICE CONDO 5			83	•					
FILAUDE	ERDALE FL 33301			84	City	· · · ·		85 Zip C	ode	
<u> </u>				1.1	•		FL			
office or r agent. I a	to the provisions of Sections 617.050: registered agent, or both, in the State of the familiar with, and accept the obligate with the obligate of the obligate	mu			ne corporation	when reinstating)	DATE	<u> </u>	-	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AN			
TITLE	P	DELETE	1.1 T	THE				Change	Addition	
NAME	LESOVSKY, MD EUGENE A		•	IAME						
STREET ADDRESS		0.5	•	TREET A	i	•				
CITY-ST-ZIP	FT LAUDERDALE FL 33301	□ DELETE		TTY-ST-Z	ZIP			Change	☐ Addition	
NAME	V Dempster, Kristin D	- Director		AME				_ •		
STREET ADDRESS		3		TREETA	DORESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33301	- 	1	CITY-ST-	ì					
TITLE	ST	☐ DELETE	3.1 T	TILE	T			☐ Change	Addition	
NAME	EDWARDS, JULIO F	•	1	IAME						
STREET ADDRESS	111 1000 07 10111007 001100	5			DORESS		•			
CITY-ST-ZIP	FT LAUDERDALE FL 33301	☐ DELETE	3.4. 0 4.1.T	CITY-ST-	ZIP			Change	Addition	
TITLE	DAMES MADTHA	- Deterior	- 1	NAME						
NAME STREET ADDRESS	DAVIES, MARTHA	5	- I*	TREETA		100	and determine to	·····		
CITY-ST-ZIP	FT LAUDERDALE FL 33301	•		TY-ST-	1					
TITLE	D	☐ DELETE	5.1 T					☐ Change	☐ Addition	
NAME	DEBOLT, SARA			IAME						
	1		# 52 C	TOTAL	ODDRESS	_				
STREET ADDRESS	141 ISLE OF VENICE UNIT 6			CITY-ST-	1	•	•			

6.4 CITY-ST-ZIP

FT LAUDERDALE FL 33301

14. 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 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 chapsed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

LOEKE, MD DAVID L G

141 ISLE OF VENICE, UNIT 1

NAME

STREET ADDRESS

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-336-420

Daytime Phone #