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Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90126 004 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 752536

1. Corporation Name
SHARLEA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 141 ISLE OF VENICE CONDO 5-A 141 ISLE OF VENICE FT LAUDERDALE FL 33301 US	Mailing Address 141 ISLE OF VENICE STE. 5A FT. LAUDERDALE FL 33301 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	3. Date Incorporated or Qualified 05/19/1980	4. FEI Number NOT APPLICABLE Applied For <input checked="" type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent EDWARDS, JULIO F/LESORS M 141 ISLE OF VENICE CONDO 5 FT LAUDERDALE FL 33301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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]* DATE: 4/12/99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P LESOVSKY, MD EUGENE A 141 ISLE OF VENICE, CONDO 5 FT LAUDERDALE FL 33301	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	V DEMPSTER, KRISTIN D 141 ISLE OF VENICE, CONDO 3 FT LAUDERDALE FL 33301	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	ST EDWARDS, JULIO F 141 ISLE OF VENICE, CONDO 5 FT LAUDERDALE FL 33301	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D DAVES, MARTHA 141 ISLE OF VENICE, CONDO 5 FT LAUDERDALE FL 33301	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D DEBOLT, SARA 141 ISLE OF VENICE UNIT 6 FT LAUDERDALE FL 33301	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D LOEKE, MD DAVID L G 141 ISLE OF VENICE, UNIT 1 FT LAUDERDALE FL 33301	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: *[Signature]* DATE: 4/12/99 DAYTIME PHONE #: 954-336-4200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (1/98)