

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



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

19965-1-9670-6240 C

DOCUMENT # **754167 (5)**

1. Corporation Name

**SHORE CLUB CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business: 3807 N.E. 166 ST. N. MIAMI BEACH FL 33160  
Mailing Address: 3807 N.E. 166 ST. N. MIAMI BEACH FL 33160

3. Date Incorporated or Qualified: 09/15/1980  
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2283189	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	23	28
Zip	Country	24	29
25	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
COHEN, JEFFREY ROY 3807 NE 166 ST. N. MIAMI BEACH FL 33160		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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COHEN, JEFFREY ROY	1.2 NAME	
STREET ADDRESS	3807 NE 166 ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	N.MIAMI BCH FL	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, JOSE	2.2 NAME	
STREET ADDRESS	3835 N.E. 166TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	DS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORTON, HECTOR	3.2 NAME	
STREET ADDRESS	3803 NE 166TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BCH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERNANDEZ, CAMILO	4.2 NAME	
STREET ADDRESS	3827 N.E. 166TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

ROBERT GOCH  
3811 NE 166 ST.  
N. MIAMI BEACH, FL 33160

ROSEANNE LEANER  
3823 NE 166 ST.  
N. MIAMI BEACH, FL 33160

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: \_\_\_\_\_ DATE: 4/20/96 (305) 940-1905

CR2E037 (12/95)