

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90246 016 ****61.25

DOCUMENT # 754167

1. Entity Name

SHORE CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3803 NE 166TH ST
 N. MIAMI BEACH FL 33160
 US

3803 NE 166TH ST
 N. MIAMI BEACH FL 33160-3855
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2283189

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORTON, HECTOR
3803 NE 166TH ST
N. MIAMI BEACH FL 33160

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. Election Campaign Financing
 Trust Fund Contribution.

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DT** Delete
 NAME **COHEN, JEFFREY ROY**
 STREET ADDRESS **3807 NE 166 ST.**
 CITY-ST-ZIP **N.MIAMI BCH FL 33160**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DS** Delete
 NAME **FERNANDEZ, JOSE**
 STREET ADDRESS **3835 N.E. 166TH STREET**
 CITY-ST-ZIP **NORTH MIAMI BEACH FL 33160**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** Delete
 NAME **CORTON, HECTOR**
 STREET ADDRESS **3803 NE 166TH ST**
 CITY-ST-ZIP **N MIAMI BCH FL 33160**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **LERNER, MARTIN R**
 STREET ADDRESS **3823 NE 166TH ST**
 CITY-ST-ZIP **N MIAMI BEACH FL 33160**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **CORTON, DOLLY**
 STREET ADDRESS **3803 NE 166TH ST**
 CITY-ST-ZIP **N MIAMI BCH FL 33160**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey Roy Cohen, Director 4/18/00

Date

Daytime Phone #

CR2E037 (9/99)