FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

6.2 NAME

6.3 STREET ADORESS

DOCUMENT # 754591

SUNSHINE ON INDIAN SHORES CONDOMINIUM ASSOCIATIO N. INC.

Principal Place of Business	Mailing Address	
HARBOUR MANAGEMENT 552 MAIN ST SAFETY HARBOR FL 34695 US	HARBOUR MANAGEMENT 552 MAIN ST SAFETY HARBOR FL 34695 US	
2. Principal Place of Business	2a. Mailing Address	

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90164 001 ****61.25

DOCUIT 1. Corporation	MEN [# 754591		•				
SUNSHINE ON INDIAN SHORES CONDOMINIUM ASSOCIATION, INC.				* 2 220565 - 90164 - 1			
Principal Place	e of Business	Mailing Address		-			
HARBOUR MAI	NAGEMENT	HARBOUR MANAGEMENT) (1881) (1881) 1881) 1881) 1881 1881 18	1111 BIBN 1111	8)8)) 88)	
552 MAIN ST SAFETY HARBI US	OR FL 34695	552 Main ST Safety Harbor FL 34695 US			818 11 11111 1111		
2. Principal Pl	lace of Business	2a. Mailing Address	· ··	3. Date Incorporated or Qualifed			
	W SR 434	26 2180 W SR 434		10/13/1980 4. FEI Number	lann	lied For	
Suite, Apt.		Suite, Apt. #, etc.		59-2438146	 -	Applicable	
2 STE 5 City & State		27 STE 5000 City & State			\$8.75 Ac		
_ ,	100D_FL	28 LONGWOOD FL		5. Certifcate of Status Desired	Fee Req	uired	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 N	, ,	
4 32779		29 32779 30	<u> US</u>	Trust Fund Contribution 10. Name and Address of New Registered A	Added to	Fees	
	9. Name and Address of Current	Registered Agent	81 Name	IU. Name and Address of New Registered A	your		
			H/	ART, JAMES W JR Address (P.O. Box Number is Not Acceptable)			
	ITEVEN H P A			ENTRY MANAGEMENT INC			
1212 COU STE B)KI 21		83				
	TER FL 34616		84 City	180 W SR 434 STE 5000	85 Zip Ce	ode	
			1 1 11	ONGWOOD FL	327	79	
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State or familiar with, and accept the obligation	Florida, Such change was author	ized by the coloc	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoint	hanging its r ment as regi	egistered istered	
SIGNATURE		<i></i>		2/26/99			<u> </u>
12.	Signature, types or printed name of registered agent OFFICERS AND		13.	adulted when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12	(11/98)
TITLE	PD		1,1 TITLE		Change	Addition	Ξ
NAME.	TRUJILLO, ALFRED	[1	I.2 NAME	TRUJILLO, ALFREDO	<i>"</i>		37
STREET ADDRESS	6407 AMBASSADOR	1	1.3 STREET ADDRESS				R2F037
CITY-ST-ZIP	TAMPA, FL 00000		1.4 CITY-\$1-ZIP	TAMPA FL 33615	V		ķ
TITLE	TD		2.1 TITLE	ŞWIRBUL RICHARD C	Change	Addition	
NAME	SWIRBUL, DICK		2.2 NAME	4938 BAYWAY DR_	•		
STREET ADDRESS			2.3 STREET ADDRESS	TAMPA FL 33629			
CITY-ST-ZIP TITLE	TAMPA, FL 00000		2. 4 CITY-ST-ZIP 3.1 TITLE		Change	Addition	
NAME	SD SHETTLE, SUZANNE		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS			,	
CITY-ST-ZIP	CLEARWATER, FL 00000	:	3.4. CITY-ST-ZIP	CLEARWATER FL 33764		<u></u> .	
TITLE	VD	☐ DELETE	4.1 TITLE		Change	Addition	!
NAME	FRANK, MARY SUE		4. 2 NAME	2611 BAVSHODE PLVD #007			l
STREET ADDRESS	1 =		4.3 STREET ADDRESS	2611 BAYSHORE BLVD #907 TAMPA FL 33629-7344			ļ
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP 5.1 TITLE		Change	Addition	l
TITLE	D VVNES MADGIE		5.1 IIILE 5.2 NAME		411 01100194		ì
NAME STREET ADDRESS	KYNES, MARGIE 5103 S. NICHOL STREET	1		5103 S NICHOLS ST			
CITY-ST-ZIP	TAMPA FL		5.4 CITY-ST-ZIP	TAMPA FL 33611-4115			
TITLE	ITMENT IL	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition	ï
	1						

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 whe receiver or trustee empowered to execute this eport as required by Chapter 617, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

813. 884-9361