FILE NOW: FILING FEE IS \$61.25

FILED NONPROFIT May 19 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8) SHORELINE GARDEN TOWNHOMES OWNERS' ASSOCIATION. Principal Place of Business Mailing Address 930 GULF SHORE DR 930 GULF SHORE OR 3. Date Incorporated or Qualified DESTIN FL 32541 DESTIN FL 32541 04/23/1982 4. FEI Number Applied For 59-2427747 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired П Yo Suncoast Association Maint 21 Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 930 Gulf Shore Drive 165 Poinciana Blvd 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes No Zip Country USA Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BETTIS, JERI (P.O. Box Number is Not Acceptable)

OAST ASSOCIATION Management Inc 82 930 GULF SHORE DR 83 **STE 14** iana. Brulevard **DESTIN FL 32541** 11. Pursuant to the provisions of B. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered in change was authorized by the corporation's board of directors. I hereby accept the appointment as registered on 617.0503, Florida Statutes. office or registero agent. I am fant SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TOTLE Change Addition SD Krutz, Debbie AMBRUSO, DANIEL NAME 1.2 NAME 930 Guif Snore Dr. #9 930 GULFSHORE DR #10 STREET ADDRESS 1.3 STREET ADDRESS **De**stin Fl CITY-ST-ZIP 015hn, PL 32541 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME **BETTIS.** JERI 2.2 NAME STREET ADDRESS 930 GULF SHORE DR #14 2.3 STREET ADDRESS CITY-ST-ZIP **DESTIN FL** 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME **DOBBS, CHARLES** 3.2 NAME 810 BIENVILLE ST APT 310 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP **NE**W ORLEANS LA 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME KRUTZ, DEBBIE 4. 2 NAME STREET ADDRESS 930 GULF SHORE DR. #23 4.3 STREET ADDRESS CITY-ST-ZIP **DESTIN FL** 4.4 CITY - ST - ZIP ☐ DELETE TITLE 5.1 TITLE **VP**D Change Addition NAME MCMAHAN, JUDY 5.2 NAME 1344 WESTMINSTER PL STREET ADDRESS 5.3 STREET ADDRESS **BIRMINGHAM AL** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE

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 suppliemental 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 addition.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP