

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

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N04858 (9)**

1. Corporation Name  
**SOUTH SHORE R.V. RESORT CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business: **7337 HIGHWAY 60 EAST LAKE WALES FL 33853**  
Mailing Address: **7337 HIGHWAY 60 EAST LAKE WALES FL 33853**

3. Date Incorporated or Qualified: **08/24/1984**  
3a. Date of Last Report: **04/18/1995**

2. Principal Place of Business: **21 SOUTH SHORE RESORT**  
2a. Mailing Address: **26 7337 Hwy 60 East**

4. FEI Number: ~~69-2501974~~ **59-3358779**  
Applied For:  Not Applicable

Suite, Apt. #, etc.: **22**

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

City & State: **23 LAKE WALES FL 33853**  
27. City & State: **28 SAME**

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

Zip: **24 33853**  
Country: **25 POLK**  
Zip: **29 33853**  
Country: **30 USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**BECKER & POLIAKOFF, P.A.  
C/O PAUL L WEAN, ESQUIRE  
SUITE 145, 901 N LAKE DESTINY DR  
MAITLAND FL 32751**

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**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: SCHABERG, J. RALPH	1.1 TITLE: PD	1.2 NAME: SMITH, JACK D.
STREET ADDRESS: 7337 HWY 60 EAST	CITY-ST-ZIP: LAKE WALES FL	1.3 STREET ADDRESS: 7337 HWY 60 EAST	1.4 CITY-ST-ZIP: LAKE WALES, FL
TITLE: VD	NAME: HUDSON, DICK	2.1 TITLE: VD	2.2 NAME: SCHABERG, J. RALPH
STREET ADDRESS: 7337 HWY 60 EAST	CITY-ST-ZIP: LAKE WALES FL	2.3 STREET ADDRESS: 7337 HWY 60 EAST	2.4 CITY-ST-ZIP: LAKE WALES, FL
TITLE: D	NAME: GUMOLA, RICHARD	3.1 TITLE: SAME	3.2 NAME: SAME
STREET ADDRESS: 7337 SR 60 E	CITY-ST-ZIP: LAKE WALES FL	3.3 STREET ADDRESS: SAME	3.4 CITY-ST-ZIP: SAME
TITLE: TD	NAME: ROBBINS, PAT	4.1 TITLE: TD	4.2 NAME: FELTON, RICHARD A.
STREET ADDRESS: 7337 HWY 60 EAST	CITY-ST-ZIP: LAKE WALES FL	4.3 STREET ADDRESS: 7337 HWY 60 EAST	4.4 CITY-ST-ZIP: LAKE WALES, FL
TITLE: SD	NAME: FELTON, RICHARD A	5.1 TITLE: SD	5.2 NAME: KNOWLTON, ROSEMARY
STREET ADDRESS: 7337 SR 60 E	CITY-ST-ZIP: LAKE WALES FL	5.3 STREET ADDRESS: 7337 HWY 60 EAST	5.4 CITY-ST-ZIP: LAKE WALES, FL
TITLE: (DELETE)	NAME: (DELETE)	6.1 TITLE: (DELETE)	6.2 NAME: (DELETE)
STREET ADDRESS: (DELETE)	CITY-ST-ZIP: (DELETE)	6.3 STREET ADDRESS: (DELETE)	6.4 CITY-ST-ZIP: (DELETE)

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: Rosemary Knowlton** *Rosemary Knowlton* 4-5-96 941-696-2674  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)