2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2004 8:00 am
Secretary of State
04-08-2004 90048 029 ****61.25

DOCUMENT # N06008

1. Entity Name

SHORELANDS WEST HOMEOWNERS' ASSOCIATION, INC.

54028872

MOORE CR2E037 (11/03)

Principal Place of Business	Mailing Address
3355 OCEAN DR VERO BEACH FL 32963	P O BOX 3741 VERO BEACH FL 32964 US

2. Principal Place of Business	3. Mailing Address
KEYSTONE PROPERTY MANAGEMENT GROUP INC	SAME
Suite, Apt. #, etc.: 1717 20th St, SUITE #102	Suite, Apt. #, etc.
City & State: VERO BEACH, FL	City & State
Zip: 32960 Country: INDIAN RIVER	Zip Country

4. FEI Number: 59-2533808 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

EVANS, RALPH L
3355 OCEAN DR
VERO BEACH FL 32963

7. Name and Address of New Registered Agent

Name: WILLIAM F. MILLER
Street Address (P.O. Box Number is Not Acceptable): KEYSTONE PROPERTY MANAGEMENT GROUP INC
1717 20th ST. SUITE #102
City: VERO BEACH FL Zip Code: 32960

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] PRESIDENT
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
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FENNELL, TODD W 979 BEACHLAND BLVD VERO BEACH FL 32963	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BURGE, KIM 1375 SHORELANDS DRIVE NORTH VERO BEACH, FL 32963	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BLACK, DWIGHT 1395 SHORLEANDS DRIVE NORTH VERO BCH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/D MCLOUGHLIN, RICHARD 1365 SHORELANDS DRIVE NORTH VERO BEACH, FL. 32963	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THAYER, BRUCE 1425 SHORELANDS DRIVE NORTH VERO BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY/TREASURER/DIRECTOR THAYER, NANCY 1425 SHORELANDS DRIVE WEST VERO BEACH, FL 32963	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Kim Burge 4/17/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #