FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N19982 (0)

1. Corporation Name

SHADY RIDGE ESTATES HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business
5440 SHADY OAKS LANE
FT. LAUDERDALE FL 33312

Mailing Address
5440 SHADY OAKS LANE
FT LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/06/1987
3a. Date of Last Report: 05/09/1994
4. FEI Number: 65-0131065 — Applied For / Not Applicable
5. Certificate of Status Desired: $8.75 Additional Fee Required
6. Electronic Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes / No

2. Principal Place of Business: 21 — 22 — 23 — 24 — 25
2a. Mailing Address: 26 — 27 — 28 — 29 — 30

9. Name and Address of Current Registered Agent
SMITH, DANIEL
5540 SHADY OAK LANE
FT. LAUDERDALE FL 33312

10. Name and Address of New Registered Agent
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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD	TITLE	PD — Change / Addition
NAME	JULIAN, DAVID	NAME	MARK Sonneborn
STREET ADDRESS	5421 SW 39TH WAY	STREET ADDRESS	5421 Shady OAK Ln
CITY ST ZIP	FT LAUDERDALE FL	CITY ST ZIP	FT Laud, FLA 33312
TITLE	VD	TITLE	V/D — Change / Addition
NAME	MORRIS, STEPHEN	NAME	Bill Fullwood
STREET ADDRESS	3840 N 38TH AVE	STREET ADDRESS	~~5728 Park Road~~
CITY ST ZIP	HOLLYWOOD FL	CITY ST ZIP	~~Ft Lauderdale, FL 33312~~
TITLE	TD	TITLE	Change / Addition
NAME	SMITH, DANIEL	NAME	
STREET ADDRESS	5440 SHADY OAK LANE	STREET ADDRESS	
CITY ST ZIP	FT. LAUDERDALE FL	CITY ST ZIP	
TITLE	SD	TITLE	S/D — Change / Addition
NAME	PASCARELLA, DENNIS	NAME	Paul Goldstein
STREET ADDRESS	5430 SW 39TH WAY	STREET ADDRESS	5418 S.W. 39th Way
CITY ST ZIP	FT LAUDERDALE FL	CITY ST ZIP	Ft Lauderdale, FL 33312
TITLE		TITLE	Change / Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	
TITLE		TITLE	Change / Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	

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)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] PLSmith T/D 5/30/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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