SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

FILED
Sep 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # N19982 (0)

1. Corporation Name
SHADY RIDGE ESTATES HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business	Mailing Address
5440 SHADY OAKS LANE FT. LAUDERDALE FL 33312	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: 03/06/1996

2. Principal Place of Business
21 Smith/Moses Assoc.
22 Suite, Apt. #, etc. 1500 Cordova Rd. Suite 300
23 City & State: Fort Lauderdale
24 Zip: 33316 25 Country: USA

2a. Mailing Address
26 1500 Cordova Road
27 Suite, Apt. #, etc. Suite 300
28 City & State: Fort Lauderdale
29 Zip: 33316 30 Country: USA

4. FEI Number: 65-0131065 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

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: Daniel Smith
82 Street Address (P.O. Box Number is Not Acceptable): 1500 Cordova Road
83 Ste. 300
84 City: Ft. Lauderdale **FL** 85 Zip Code: 33312

11. Pursuant to the provisions of Sections 617.0501 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 617.0[illegible] Florida Statutes.

SIGNATURE _____ 8-19-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SONNEBORN, MARK		1.2 NAME		
STREET ADDRESS	5421 SHADY OAK LN.		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLE	~~VD~~	☐ DELETE	2.1 TITLE	(T) - Treasurer, Director (D)	☑ Change ☐ Addition
NAME	FULLWOOD, BILL		2.2 NAME	Fullwood, William	
STREET ADDRESS	3920 SW 54TH CT.		2.3 STREET ADDRESS	3920 S.W. 54th Court	
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33312	
TITLE	TD	☐ DELETE	3.1 TITLE	(D) Director	☑ Change ☐ Addition
NAME	SMITH, DANIEL		3.2 NAME	Daniel Smith	
STREET ADDRESS	5440 SHADY OAK LANE		3.3 STREET ADDRESS	1500 Cordova Road, Ste. 300	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP	Fort Lauderdale, FL 33316	
TITLE	~~SD~~	☐ DELETE	4.1 TITLE	Vice-President (V), Director (D)	☑ Change ☐ Addition
NAME	GOLDSTEIN, PAUL		4. 2 NAME	Paul Goldstein	
STREET ADDRESS	5418 SW 39TH WAY		4.3 STREET ADDRESS	5418 S.W. 39th Way	
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33312	
TITLE	President	☐ DELETE	5.1 TITLE	President (P), Director (D)	☐ Change ☑ Addition
NAME	Jeff Winepol		5.2 NAME	Jeff Winepol	
STREET ADDRESS	3930 S.W. 54th Court		5.3 STREET ADDRESS	3930 S.W. 54th Court	
CITY-ST-ZIP	Ft. Lauderdale, FL 33312		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33312	
TITLE	Secretary	☐ DELETE	6.1 TITLE	Secretary (S), Director (D)	☐ Change ☑ Addition
NAME	Dan Spina		6.2 NAME	Dan Spina	
STREET ADDRESS	5421 Shady Oak Lane		6.3 STREET ADDRESS	5421 Shady Oak Lane	
CITY-ST-ZIP	Ft. Laud., FL 33312		6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33312	

CR2E037 (4/97)

14. I do 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 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: [illegible] 8/19/97 (DATE) 954-[illegible]