FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Matham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name N48902 (3)

THE SHELLS ON SIESTA KEY CONDOMINIUM ASSOCIATION INC.

, INC-					
Principal Place	of Business	Mailing Address			386 81811 81811 81811 B1816 B1816 B1811 B1811 1881
221 TENACITY LN SARASOTA FL 34242		221 TENACITY LN SARASOTA FL 34242			
U\$		US		3. Date Incorporated or Qualified 05/15/1992	3a. Date of Last Report 04/11/1995
2. Principal Pla	ice of Business	2a. Mailing Address 26		4. FEI Number 65-0363836	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	····	5. Certificate of Status Desired	\$8.75 Additional
22		27		B. Germodic of Clarks Bosinos	Fee Hequired
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for int	
24	[25]	29 30	0	Florida Statutes 10. Name and Address of New Re	Yes No
	9. Name and Address of Curren	nt Hegistered Agent	81 Name		
			VI Namo	RUTH O'BRIEN Address (P.O. Box Number is Not Acceptable	
CRAVEN, JULIA B			82 Street Arkress (P.O. Box Number is Not Acceptable) 306 BEACH ROAD		
221 TENACITY LN SARASOTA FL 34242			83	306 BEHGH NOND	
	11A FL 34242				
•			84 City	SARASOTA	FL 85 Zio Code 34a4a
• 11 Pursuant t	a the provisions of Sections 617.050	2 and 617,1508. Florida Statutes, t	he above-named co	progration outspits this statement for the purp	ase of changing its registered office
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.					
	19 12 12 12 12 mm	· **		ي	3,25.96
SIGNATURE _	Signature, typed or printed name of registered agen	Lt and title if applicable (NOTE: F	legislered Agent signature re		DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TITEE	V/P	Change Addition
NAME	o'Brien, John		1.2 NAME	OBRIEN, JOHN 306 BEACH ROAD	
STREET ADDRESS	306 BEACH RD.		1.3 STREET ADDRESS	306 BEACH ROAD	
CITY - ST - ZIP	SARASOTA FL 34242		1.4 CITY - ST - ZIP	SARASOTA , FL 34242	
TITLE	PD	⊠ DELETE	2 1 THTLE		☐ Change ☐ Addition
NAME	CRAVEN, JULIA		2 2 NAME		
STREET ADDRESS	221 TERACITY LANE		2 3 STREET ADDRESS		
CHTY-ST-ZIP	SARASOTA FL 34242		2 4 CITY-ST-ZIP	~ / 6	Change El Addition
TITLE	VD	☐ DELE TE	. 3.1 11TLF	SID	Change Addition
NAME	MCKNIGHT, ROBERT		3 2 NAME	MCKNIGHT, ROBERT 314 BEACH ROAD	
STREET ADDRESS	312 BEACH RD.		3 3 STREET ADDRESS	SARASOTA, FL 34242	
CITY-ST-ZIP	SARASOTA FL 34242	Cherrie	3 4. CHTY - ST - ZIP	P/D	Change Addition
TITLE		□ D€LETE	4.1 TITLE	OBRIEN, RUTH	Change
NAME			4. 2 NAME	306 BEACH ROAD	
STREET ADDRESS			4.3 STREET ADDRESS	SARASOTA, FL 34242	
CITY-SI-ZIP		DELETE	44 CITY - ST - ZIP 51 TITLE	20000176	Charige Addition
NAME		Doctore	5.2 NAME	-04/03/96010	
			5.3 STREET ADDRESS	***61.25	
STREET ADDRESS			5.4 CiTY-ST-ZiP		
CITY-ST-ZIP TITLE		DELETE	5.4 CH Y-31-2H		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
			64 CITY-ST-ZIP		
CITY-ST-ZIP			V-10111 01-411	L	2/07/13 Florida Chat.dog 16 whore

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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: Ruth O'Brien 2.14.96 941 349 8821

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.14.96 941 349 8821

CR2E037 (12/95)