

FILE NOW: FILING FEE IS \$61.25

FILED
May 06 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 # N96000006113 (2)

1. Corporation Name
SHANNON LAKES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 1155 SOUTH SEMORAN BLVD. #1118 WINTER PARK FL 32792
Mailing Address: 1155 SOUTH SEMORAN BLVD. #1118 WINTER PARK FL 32792-5505

3. Date Incorporated or Qualified: 11/25/1996
3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 25 Country 29 Zip Country 30 Country

4. FEI Number: 59-3423421
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 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

TEPLITSKY, IGOR
1155 SOUTH SEMORAN BLVD. #1118
WINTER PARK FL 32792

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 file if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE: D [] DELETE
12.2 NAME: TEPLITSKY, IGOR
12.3 STREET ADDRESS: 1155 SOUTH SEMORAN BLVD. #1118 WINTER PARK FL 32792
12.4 CITY-ST-ZIP: WINTER PARK FL 32792
12.5 TITLE: D [] DELETE
12.6 NAME: MORIN, JOSEPH W
12.7 STREET ADDRESS: 1155 SOUTH SEMORAN BLVD. #1118 WINTER PARK FL 32792
12.8 CITY-ST-ZIP: WINTER PARK FL 32792
12.9 TITLE: D [] DELETE
12.10 NAME: DAVIS, LYAL A
12.11 STREET ADDRESS: 1155 SOUTH SEMORAN BLVD. #1118 WINTER PARK FL 32792
12.12 CITY-ST-ZIP: WINTER PARK FL 32792
12.13 TITLE: [] DELETE
12.14 NAME:
12.15 STREET ADDRESS:
12.16 CITY-ST-ZIP:
12.17 TITLE: [] DELETE
12.18 NAME:
12.19 STREET ADDRESS:
12.20 CITY-ST-ZIP:

13.1 1.1 TITLE: [] Change [] Addition
13.2 1.2 NAME:
13.3 1.3 STREET ADDRESS:
13.4 1.4 CITY-ST-ZIP:
13.5 2.1 TITLE: [] Change [] Addition
13.6 2.2 NAME:
13.7 2.3 STREET ADDRESS:
13.8 2.4 CITY-ST-ZIP:
13.9 3.1 TITLE: [] Change [] Addition
13.10 3.2 NAME:
13.11 3.3 STREET ADDRESS:
13.12 3.4 CITY-ST-ZIP:
13.13 4.1 TITLE: [] Change [] Addition
13.14 4.2 NAME:
13.15 4.3 STREET ADDRESS:
13.16 4.4 CITY-ST-ZIP:
13.17 5.1 TITLE: [] Change [] Addition
13.18 5.2 NAME:
13.19 5.3 STREET ADDRESS:
13.20 5.4 CITY-ST-ZIP:
13.21 6.1 TITLE: [] Change [] Addition
13.22 6.2 NAME:
13.23 6.3 STREET ADDRESS:
13.24 6.4 CITY-ST-ZIP:

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.

CR2E037 (9/96)