

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 678952 (3)

1. Corporation Name

SHARONDALE REALTY, INC.



Principal Place of Business

1191 8TH ST. S.
COVE INN SE 2-C
NAPLES FL 33940
US

Mailing Address

1191 8TH ST. S.
COVE INN STE 2-C
NAPLES FL 33940
US

2. Principal Place of Business

2a. Mailing Address

21 280 Gulf Shore Blvd.N. 26 280 Gulf Shore Blvd.N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Naples, FL

28 Naples, FL

24 33940

25 USA

29 33940

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
07/18/1980

3a. Date of Last Report
04/27/1995

4. FFI Number

59-2015017

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

10. Name and Address of New Registered Agent

PHILLIPS, JACKIE S

1191 8TH ST. S.

COVE INN 2-C

NAPLES FL 33940

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 280 Gulf Shore Blvd. N.

84 City

Naples, FL

85 Zip Code

FL 33940

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

Signature (typed or printed name of registered agent and date of appointment)

NOTE: Registered Agent Signatures are required for all filings.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP

PST
GOLDSTEIN, IRMA
2265 41ST ST SW
NAPLES FL

DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

DELETE

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TITLE NAME STREET ADDRESS CITY- ST- ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP

Naples, FL 33999

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY- ST- ZIP

8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY- ST- ZIP

9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY- ST- ZIP

10.1 TITLE 10.2 NAME 10.3 STREET ADDRESS 10.4 CITY- ST- ZIP

11.1 TITLE 11.2 NAME 11.3 STREET ADDRESS 11.4 CITY- ST- ZIP

12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY- ST- ZIP

13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY- ST- ZIP

14.1 TITLE 14.2 NAME 14.3 STREET ADDRESS 14.4 CITY- ST- ZIP

15.1 TITLE 15.2 NAME 15.3 STREET ADDRESS 15.4 CITY- ST- ZIP

16.1 TITLE 16.2 NAME 16.3 STREET ADDRESS 16.4 CITY- ST- ZIP

17.1 TITLE 17.2 NAME 17.3 STREET ADDRESS 17.4 CITY- ST- ZIP

18.1 TITLE 18.2 NAME 18.3 STREET ADDRESS 18.4 CITY- ST- ZIP

19.1 TITLE 19.2 NAME 19.3 STREET ADDRESS 19.4 CITY- ST- ZIP

20.1 TITLE 20.2 NAME 20.3 STREET ADDRESS 20.4 CITY- ST- ZIP

21.1 TITLE 21.2 NAME 21.3 STREET ADDRESS 21.4 CITY- ST- ZIP

22.1 TITLE 22.2 NAME 22.3 STREET ADDRESS 22.4 CITY- ST- ZIP

23.1 TITLE 23.2 NAME 23.3 STREET ADDRESS 23.4 CITY- ST- ZIP

24.1 TITLE 24.2 NAME 24.3 STREET ADDRESS 24.4 CITY- ST- ZIP

SIGNATURE:

Irma Goldstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96

941/263-0054

CR2E034 (12/95)