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May 20 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 726920 (2)

1. Corporation Name

TOLL GATE SHORES ASSOCIATION, INC.



Principal Place of Business

Mailing Address

220 TOLL GATE BLVD.
ISLAMORADA FL 33036220 TOLL GATE BLVD.
ISLAMORADA FL 33036-42203. Date incorporated or Qualified
07/10/19733a. Date of Last Report
04/03/1996

2. Principal Place of Business

2a. Mailing Address

21 153 Toll Gate Lane

26 153 Toll Gate Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Islamorada, FL

27 Islamorada, FL

City & State

City & State

23 33036

28 33036

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RASH, STEPHEN H.
ONE INTERNATIONAL PL.
SUITE 2800
MIAMI FL 33131-2144

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 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
NAME HOUDER, DONALD B
STREET ADDRESS 217 TOLL GATE BLVD.
CITY-ST-ZIP ISLAMORADA FL 330361.1 TITLE ☐ Change ☐ Addition
1.2 NAME PORTOLANI, ARTHUR
1.3 STREET ADDRESS 213 Toll Gate Blvd
1.4 CITY-ST-ZIP Islamorada, FL 33036TITLE VD ☐ DELETE
NAME BURGER, LEONARD C
STREET ADDRESS 126 TOLL GATE LANE
CITY-ST-ZIP ISLAMORADA FL 330362.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE TD ☒ DELETE
NAME KLENDSHOJ, ARNE
STREET ADDRESS 220 TOLL GATE BLVD.
CITY-ST-ZIP ISLAMORADA FL 330363.1 TITLE ☐ Change ☐ Addition
3.2 NAME TD Barbara S. Hoag
3.3 STREET ADDRESS 153 Toll Gate Lane
3.4 CITY-ST-ZIP Islamorada, FL 33036TITLE S ☐ DELETE
NAME EDGAR, SUSAN
STREET ADDRESS 3021 NE 36TH ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL 330364.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME SAIGER, GLENN
STREET ADDRESS 311 TOLL GATE SHORES DRIVE
CITY-ST-ZIP ISLAMORADA FL 330365.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME ROSSIGNOL, CHARLES
STREET ADDRESS 253 TOLL GATE BLVD.
CITY-ST-ZIP ISLAMORADA FL 330366.1 TITLE ☐ Change ☐ Addition
6.2 NAME D BRUCE HABERMEHL
6.3 STREET ADDRESS 133 Toll Gate Lane
6.4 CITY-ST-ZIP Islamorada, FL 33036

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: Barbara S. Hoag

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 12, 1997

Date

305-664-4947

Daytime Phone # 0024313

CR2E037 (9/96)