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**FILED**  
**Feb 24, 1999 8:00 am**  
**Secretary of State**

02-24-1999 90072 001 \*\*\*\*61.25

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 742253**

1. Corporation Name

**NORTH SHORE NORMANDY ASSOCIATION, INC.**

Principal Place of Business

1120 N. SHORE DRIVE NE  
 ST. PETERSBURG FL 33701

Mailing Address

1120 N. SHORE DRIVE NE  
 ST. PETERSBURG FL 33701



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	03/30/1978
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-1812199
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23	28	6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees
Zip	Country	Trust Fund Contribution <input type="checkbox"/>
24	25	29
30		

9. Name and Address of Current Registered Agent

**ARNOLD, JAY**  
 1120 N SHORE DR  
 STE 903  
 ST PETE FL 33701

10. Name and Address of New Registered Agent

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 <input type="checkbox"/> DELETE	1.1 TITLE	2nd Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARNOLD, JAY	1.2 NAME	Albert Edgemon
STREET ADDRESS	1120 SHORE DR NE #903	1.3 STREET ADDRESS	1120 N Shore Dr. NE #704
CITY-ST-ZIP	ST PETERSBURG FL	1.4 CITY-ST-ZIP	St. Petersburg, FL. 33701
TITLE	TD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOPF, MARGE	2.2 NAME	William Murphy
STREET ADDRESS	1120 N SHORE DR NE #902	2.3 STREET ADDRESS	1120 N. Shore Dr. NE #401
CITY-ST-ZIP	ST PETERSBURG FL	2.4 CITY-ST-ZIP	St. Petersburg, FL. 33701
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	ARNOLD, HARRIET	3.2 NAME	
STREET ADDRESS	1120 N SHORE DR NE #903	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	BEVINS, LEON	4.2 NAME	
STREET ADDRESS	1120 N SHORE DR NE #402	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST.PETERSBURG FL 33701	4.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	
NAME	GRAFFAM, DON	5.2 NAME	
STREET ADDRESS	1120 N. SHORE DRIVE NE #602	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33701	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

William Murphy, Treasurer

1-18-99 (727)894-315

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)