

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 707089 (9)

1. Corporation Name
BAYSHORE GARDENS CONDOMINIUM APARTMENTS ASSOCIATION, INC.



Principal Place of Business: 1600 LEISURE DRIVE BRADENTON FL 34207
Mailing Address: 1600 LEISURE DRIVE BRADENTON FL 34207

3. Date Incorporated or Qualified: 03/31/1964
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-fields for Suite, City & State, Zip, and Country.
4. FEI Number: 59-1096968
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$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: KROEGER, RONALD H, 2611-47TH ST W, BRADENTON FL 34209
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ (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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISELE, HANS	1.2 NAME	
STREET ADDRESS	1625 LEISURE C26	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 33507	1.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SULLIVAN, RITA	2.2 NAME	VD JOHNSON, ROBERT
STREET ADDRESS	5400 34TH ST W #3J	2.3 STREET ADDRESS	5934 EASY, K25
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	BRADENTON FL 34209
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SKIDGELL, GEORGE	3.2 NAME	
STREET ADDRESS	1546 LEISURE N24	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMIALEK, BARBARA	4.2 NAME	
STREET ADDRESS	5929 TODD, D23	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DARLING, PRISCILLA	5.2 NAME	D PALMESI, A.M.
STREET ADDRESS	5952 EASY K-37	5.3 STREET ADDRESS	1533 LEISURE, M21
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	BRADENTON FL 34207
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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: George A Skidgell 4/30/96 (941) 792-7873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Time Phone #

CR2E037 (12/95)