


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90058 019 ****61.25

DOCUMENT # 712844			
1. Entity Name UNIT 3-COUNTRY CLUB SHORES ASSOCIATION, INC.			
Principal Place of Business 524 HORNBLOWER LN. LONGBOAT KEY, FL 34228 US		Mailing Address P.O. BOX 8044 LONGBOAT KEY, FL 34228 US	
2. Principal Place of Business 560 HORNBLOWER LN		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State LONGBOAT KEY FL.		City & State	
Zip 34228	Country USA	Zip	Country
6. Name and Address of Current Registered Agent GILLIAM, RICHARD 560 HORNBLOWER LANE LONGBOAT KEY, FL 34228		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: RICHARD GILLIAM PRESIDENT		SIGNATURE: <i>[Signature]</i>	
Signature, typed or printed name of registered agent and title if applicable.		Signature, typed or printed name of registered agent and title if applicable.	
(NOTE: Registered Agent signature required when reinstating)		(NOTE: Registered Agent signature required when reinstating)	
DATE: 03/31/05		DATE: 03/31/05	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRASIER, FRAN <input checked="" type="checkbox"/> Delete 524 HORNBLOWER LANE LONGBOAT KEY, FL 34228	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RICHARD GILLIAM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 560 HORNBLOWER LN LONGBOAT KEY FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CALLENDER, KATHLEEN <input checked="" type="checkbox"/> Delete 549 OUTRIGGER LANE LONGBOAT KEY, FL 34228	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GILLIAM, RICHARD <input checked="" type="checkbox"/> Delete 560 HORNBLOWER LANE LONGBOAT KEY, FL 34228	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BILL STEELE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 560 GUNWALE LN LONGBOAT KEY FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JACOB, ELLEN <input checked="" type="checkbox"/> Delete 580 SPINNAKER LANE LONGBOAT KEY, FL 34228	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JERRY BERNAS <input type="checkbox"/> Change <input type="checkbox"/> Addition 549 GUNWALE LN LONGBOAT KEY FL 34228
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i> RICHARD GILLIAM		SIGNATURE: <i>[Signature]</i> RICHARD GILLIAM	
Signature and typed or printed name of signing officer or director		Signature and typed or printed name of signing officer or director	
Date: 03/31/05		Date: 03/31/05	
Daytime Phone #		Daytime Phone # (41) 383-1345	