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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 719935 (9)

1. Corporation Name

SHORE CLUB ASSOCIATION, INC.

Principal Place of Business	Mailing Address
118 SHORE COURT NORTH PALM BEACH FL 33408	118 SHORE COURT NORTH PALM BEACH FL 33408-5510

3. Date Incorporated or Qualified: 12/28/1970
3a. Date of Last Report: 06/12/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-1313738 ☐ 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

9. Name and Address of Current Registered Agent

COUILLARD, VIRGINIA
100 SHORE CT, APT 106-A
N PALM BCH FL 33408

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 Virginia Couillard 3-6-97
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	~~VPD~~	☐ DELETE	1.1 TITLE	SEC.	☒ Change ☐ Addition
NAME	AKINS, JANE		1.2 NAME		
STREET ADDRESS	100 SHORE COURT 114A		1.3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BEACH, FL 00000		1.4 CITY-ST-ZIP		
TITLE	~~PD~~	☒ DELETE	2.1 TITLE	PD	☒ Change ☐ Addition
NAME	~~STAR, DAVID~~		2.2 NAME	WIRTH, JACK	
STREET ADDRESS	~~100 SHORE CT, APT 115A~~		2.3 STREET ADDRESS	100 SHORE CT, APT. 108A	
CITY-ST-ZIP	~~N PALM BCH FL~~		2.4 CITY-ST-ZIP	N Palm Beach Fl	
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	COUILLARD, VIRGINIA		3.2 NAME		
STREET ADDRESS	100 SHORE CT, APT 106A		3.3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BEACH, FL 00000		3.4 CITY-ST-ZIP		
TITLE	~~PS~~	☐ DELETE	4.1 TITLE	D	☒ Change ☐ Addition
NAME	~~LARRY TUELES~~		4.2 NAME	TULLIS, LARRY	
STREET ADDRESS	~~110 SHORE CT-B~~		4.3 STREET ADDRESS	110 SHORE CT.-B	
CITY-ST-ZIP	~~N PALM BCH FL~~		4.4 CITY-ST-ZIP	N Palm Beach Fl	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HOLMER, JOHN		5.2 NAME		
STREET ADDRESS	111 SHORE CT-311C		5.3 STREET ADDRESS		
CITY-ST-ZIP	N PALM BEACH, FL 00000		5.4 CITY-ST-ZIP		
TITLE	~~P~~	☒ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	~~PERRON, EDWARD~~		6.2 NAME	MARY HELEN HARRIS	
STREET ADDRESS	~~111 SHORE CT-310C~~		6.3 STREET ADDRESS	111 SHORE CT-304C	
CITY-ST-ZIP	~~N PALM BEACH, FL 00000~~		6.4 CITY-ST-ZIP	N Palm Beach Fl.	

CR2E037 (9/96)

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: VIRGINIA COUILLARD Virginia Couillard 3-6-97 561-863-6395
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0040584