SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Aug 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 720372

1. Corporation Name

(2)

EASTERN SHORES WHITE HOUSE ASSOCIATION, INC.

Principal Plan	ce of Business	Malling Address				
i i		Malling Address				isas albit didit Sibil bibit bibit bibit 1881
3660 NE 166TH ST. 3660 NE 166TH ST. OFFICE BOX 817 OFFICE BOX 817				İ		
OFFICE BOX 817 N MIAMI BEACH FL 33160 N MIAMI BEACH FL 33160 N MIAMI BEACH FL 33160					DO NOT WRITE	E IN THIS SPACE
					 Date Incorporated or Qualified 02/26/1971 	3a. Date of Last Report 02/16/1996
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Culta 4-1					59-1533942	Not Applicable
Suite, Apr.	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	S8.75 Additional
	27 27				A Florida B	Fee Required
23	28				 Election Campaign Financing Trust Fund Contribution 	\$5.00 May Be
Zip			Countr	v	8. This corporation owes or has pr	
24	25	29	30	,	Personal Property Tax due June	
	9, Name and Address of Curren	it Registered Agent	.,10-1		10. Name and Address of New Re	egistered Agent
I			81	Name		
POLIAKOFF, GARY A., PRESIDENT 82 Street Ad					Address (P.O. Box Number is Not Accepta	h(a)
BECKER & POLIAKOFF, P. A.					Addition to DOX Number is NOt Accepte	יסוע
3111 STIRLING ROAD						
FT. LAUI	DERDALE, FL 33312		84	City		loci Zin Codo
				•••		FL 85 Zip Code
11. Pursuant office or	to the provisions of Sections 617.050, registered agent, or both, in the State	2 and 617.1508, Florida Statut of Florida, Such change was	tes, the above	e-named y the corp	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
	am lamiliar with, and accept the obliga	ations of, Section 617.0503, FI	lorida Statute	S .	·	
SIGNATURE	Signature, typed or printed name of registered age	int and title if epolicable (NO)	TF: Bagislared An	eni tannis toe	required when reinstating)	DATE
12.	OFFICERS AND		13.	on agricult	ADDITIONS/CHANGES TO OFFIC	
TITLE	PDT	☐ DELETE	1.1 TITLE		P/D	Change Addition
NAME	PARRINO, ANNETTE		1.2 NAME		(/-	_ • -
STREET ADDRESS	3860 NE 166TH ST		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	N MIAMI BCH, FL 00000		1.4 CiTY-	ST-ZIP		
TITLE	VD SCHETE		2.1 TITLE		T/D .	Change Addition
NAME	GRODSKY, ALVIN		2.2 NAME		A18val Selige St. 3660 N.B. 76692 St.	
STREET ADDRESS	3660 NE 166TH ST		2.3 STREE	T ADDRESS		
City-St-ZiP	N MIAMI BCH, FL 00000		2.4 CITY-	ST-ZIP	N. Miami Beach, FL:	3 <i>3160</i>
TITLE	D DELETE		3.1 TITLE		11)	Change Addition
NAME	Suarez, gino		3.2 NAME		Murray Gloser	
STREET ADDRESS	3660 NE 166TH ST		3.3 STREE	ADDRESS	Murray Glaser 3660 N.E. 166th ST.	
CITY-ST-ZIP	N MAIMI BCH, FL 00000		3,4. CITY-	ST-ZIP	N. Miam Beach, FL.	33/60
TITLE	STD	DELETE	4.1 TITLE		S/L)	Change Addition
NAME	SUAREZ, ELENA		4. 2 NAME		Sidney Keichman	
STREET ADDRESS	3660 NW 166 ST		4.3 STREET	ADDRESS	3660 N. E. 166 th St.	
CITY-ST-ZIP	N MIAMI BEACH FL		4.4 CITY-5	ST-ZIP	Sidney Reichman 3660 N. E. 166 th St. N. Miami Beach, FL 3	3/60
TUTE	D	DELETE	5.1 TITLE		V/D	✓ Change
NAME	PACIFICO, RALPH		5.2 NAME			
STREET ADDRESS	3660 NORTHEAST 166TH STR	EET	5.3 STREET	ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BEACH FL	· · · · · · · · · · · · · · · · · · ·	5.4 CITY-S	ST-ZIP		
TITLE	D	DELETE	6.1 TITLE		470	Addition Addition
NAME	DEAN, DOLORES		6.2 NAME			
STREET ADDRESS	3660 NE 166 ST.		6.3 STREET	ADDRESS		
CITY-ST-ZIP	N MIAMI BEACH FL	1 M AL 200	6.4 CITY-5	T-ZIP		
14. I do neret	by certify that the information supplied In indicated on thi s annual report or su	i with this filing does not qualif upplemental annual report is t	ty for the exe rue and acci	mption st rate and	tated in Section 119.07(3)(i), Florida Statute that my signature shall have the same legs	s. I further certify that the
I am an o	fficer or director of the corporation or	the receiver or trustee empow	vered to exec	tite this re	that my signature shall have the same lega eport as required by Chapter 617, Florida S	statutes; and that my name
uppears I	n Block 12 or Block 13 if changed, or	Cincille	am	no	_ /. /-	_