

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
FILED**

95 MAY -1 PM 5: 45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 733284 (4)

1. Corporation Name
FLORIDA SHORE AND BEACH PRESERVATION ASSOCIATION, INC.

Principal Place of Business Mailing Address
864 EAST PARK AVENUE 864 EAST PARK AVENUE
TALLAHASSEE FL 32301 TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/11/1975 3a. Date of Last Report 01/25/1994
4. FEI Number 59-1876345 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 100.022, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
TAIT, STAN
864 EAST PARK AVENUE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY, ST, ZIP
D TERRY, JAMES B. 315 COURT ST. CLEARWATER FL
P TAIT, STANLEY L. 864 E PARK AVE TALLAHASSEE FL
D TEN BROEK, ALLEN 13391 MC GREGOR BLVD. FT. MYERS FL
D CAMPBELL, THOMAS 2481 NW BOCA RATON BLVD. BOCA RATON FL
CP OLSEN, ERIK 4438 HERSCHEL ST JACKSONVILLE FL
VC CLINGER, ROBERT 1406 OXFORD LANE BOYNTON BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP
15 CITY - ST - ZIP 16 CITY - ST - ZIP
17 CITY - ST - ZIP 18 CITY - ST - ZIP
19 CITY - ST - ZIP 20 CITY - ST - ZIP
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP
25 CITY - ST - ZIP 26 CITY - ST - ZIP
27 CITY - ST - ZIP 28 CITY - ST - ZIP
29 CITY - ST - ZIP 30 CITY - ST - ZIP
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP
35 CITY - ST - ZIP 36 CITY - ST - ZIP
37 CITY - ST - ZIP 38 CITY - ST - ZIP
39 CITY - ST - ZIP 40 CITY - ST - ZIP
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP
45 CITY - ST - ZIP 46 CITY - ST - ZIP
47 CITY - ST - ZIP 48 CITY - ST - ZIP
49 CITY - ST - ZIP 50 CITY - ST - ZIP
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP
55 CITY - ST - ZIP 56 CITY - ST - ZIP
57 CITY - ST - ZIP 58 CITY - ST - ZIP
59 CITY - ST - ZIP 60 CITY - ST - ZIP
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

Change Addition
400001478434
-05/08/95==010281ange0000 Addition
*****61.25 *****61.25
MALCOLM Mc LOUTH Change Addition
8680 N. ATLANTIC AVE.
CAPE CANAVERAL, FL
DEBBIE NORTON Change Addition
P.O. DRAWER 1208 N/A
PENSACOLA BEACH, FL
BRIAN FLYNN Change Addition
33 SW 2ND AVE. #300
MIAMI, FL 33130
\$M 5/1

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 110.07(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: Stanley L. Tait 4/29/95 (904) 222-7677
STANLEY L. TAIT PRESIDENT