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Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90173 018 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 735425
 1. Corporation Name
 THE SHUTTERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
 155 YACHT CLUB DR. 155 YACHT CLUB DR.
 NO. PALM BEACH FL 33408 NO. PALM BEACH FL 33408

272467-90112-80



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	03/30/1976
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-1833567
24 Country	29 Country	Applied For
	30	Not Applicable
9. Name and Address of Current Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
MORGAN, RAY 155 YACHT CLUB DR SUITE 308 #308 NO PALM BEACH FL 33408		81 Name	Donald Saharek	
		82 Street Address (P.O. Box Number is Not Acceptable)	155 Yacht Club Drive	
		83	#403	
		84 City	North Palm Beach	85 Zip Code

11. Pursuant to the provisions of Sections 817.0502 and 817.1508, 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 817.0503, Florida Statutes.

SIGNATURE Donald W. Saharek President DATE 3-25-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TDD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIDDLETON, ROSE	1.2 NAME	
STREET ADDRESS	155 YACHT CLUB DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	NO PALM BEACH FL 33408	1.4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	President <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MORGAN, RAY	2.2 NAME	Donald Saharek
STREET ADDRESS	155 YACHT CLUB DR SUITE 308	2.3 STREET ADDRESS	155 Yacht Club Drive #403
CITY-ST-ZIP	NO PALM BEACH FL	2.4 CITY-ST-ZIP	North Palm Beach, FL 33408
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MOUNT, MILDRED	3.2 NAME	Mathew D. Ventolier
STREET ADDRESS	155 YACHT CLUB DR SUITE 408	3.3 STREET ADDRESS	155 Yacht Club Drive #405
CITY-ST-ZIP	NO PALM BEACH FL 33408	3.4 CITY-ST-ZIP	North Palm Beach, FL 33408
TITLE	ASD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICKETTS, PATRICIA	4.2 NAME	
STREET ADDRESS	155 YACHT CLUB DR SUITE 205	4.3 STREET ADDRESS	
CITY-ST-ZIP	NO PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAGLIARDI, VINCENT	5.2 NAME	
STREET ADDRESS	155 YACHT CLUB DR SUITE 308	5.3 STREET ADDRESS	
CITY-ST-ZIP	NO PALM BEACH FL 33408	5.4 CITY-ST-ZIP	
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 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, with all other like empowered.

SIGNATURE: Donald W. Saharek Pres. DATE: 3-25-99 561-775-1183

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald Saharek Pres.

CR2E037 (1/98)