2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Feb 26, 2003 8:00 am Secretary of State 02-06-2003 90071 012 ****61.25

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1. Entity N	NAME OF # 75765 RN SHORES MANOR CONDO		N. IN			02 00 2003 9	0071 012	01.23	
Principal Place of Business 16851 NE 35TH AVE NO MIAMI BCH FL 33160 2. Principal Place of Business		Mailing Address 16851 NE 35TH AVE NO MIAMI BCH FL 3316	•						
		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-2186080 Applied For				\exists
Zip Country		Ζiρ	Country	1	5. Certificate of Status Desired S8.75 Addition Fee Required			Not Applicab Additional	
	6. Name and Address of Curre	ent Registered Agent			7. Name and Ad	dress of New Registe		Jirea	4
OT DAY	TWO CORRESPONDENCE	The state of the s	N	lame			A Ageni		\dashv
16851 N	TRICKS CORPORATION NE 35TH AVE #26 MIAMI BEACH FL 33160	, ý	s	Street Address (P.O. Box Number is Not Acceptable)					
HORIT	MININI DEACH PL 33100	•		ity	·				
D The show				-		F	FL Zip Co		
the oblig	ve named entity submits this statement pations of registered agent.	t for the purpose of changing it	s registered of	ffice or registere	ed agent, or both, in	the State of Florida. I	am familiar wit	h, and accept	
SIGNATURE									
	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TE: Registered Ager	nt signature required v	vhen reinstating)	DAT	TE .		
	FILE NOW: FEE IS \$61.25	9. Election Ca Trust Fund	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Make Check Payable to Florida Department of State			
10.	OFFICERS AND D	DIRECTORS	11.	AC	DDITIONS/CHANG	L ES TO OFFICERS AND	DIRECTORS	N 10	4
NAME STREET ADDRESS CITY-ST-ZIP	BALEY, NOEL A	Oelete	TITLE NAME STREET ADD	PD BALE 1685	Y MARY J	•	Change		CR2E037 (10/02)
TITLE	D mirani but, Ft touto		CITY-ST-ZI	NOM	IAMI BCH	FL 33160			
NAME STREET ADDRESS CITY-ST-ZIP	MAINE, JOHN C.	⊕ Delete	NAME STREET ADD	SA BADI RESS 1685	CHE ANNE	· · ·	Change	☐ Addition	CR2
TITLE	D	86 Defete	TITLE	αT	- DOM			· 	_
NAME Street address City-St-Zip	BALEY, MARY J. 16851 NE 35 AVE N MIAMI FL		NAME STREET ADDR CITY+ST-ZIP	MERA 1685	L MARY T. 1 N.E. 35 IAMI BCH,	th AVENUE FL 33160	Change	Addition	
TITLE NAME		☐ Delete	TITLE			· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	1
STREET ADORESS		÷	STREET ADDR	ESS	•		_ •		
ITLE		☐ Delete	TITLE			· · · · · · · · · · · · · · · · · · ·	Channe		-
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itle Ame		☐ Delete	TITLE				Change	☐ Addition	
TREET ADDRESS		:*	NAME STREET ADORE	25			ren enthe	- Waterion	
TY-ST-ZIP			CITY-ST-ZIP	_				İ	
I hereby c	ertify that the information supplied with	this filing does not qualify for	LL					į	

I nereby 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

SIGNATURE: A BIGNATURE AND TYPED OR PRINTED HAME OF EXCHANG OFFICER OR DIRECTOR