2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

John Block

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Jul 28, 2004 8:00 am Secretary of State **DOCUMENT # 811627** 1. Entity Name 07-28-2004 90023 014 ****61.25 THE SHORELAND, INC. Principal Place of Business! Mailing Address 1203 HILLSBORO MILE HILLSBORO BEACH FL 33062 1203 HILLSBORO MILE 44050287 HILLSBORO BEACH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORF CR2E037 (4/04) City & State City & State Applied For 4. FEI Number 59-0783981 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KOUKOULIS, ANGELO 1203 HILLSBORO MILE C/O SHORELAND HILLSBORO BEACH FL 33062 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By September 8, 2004 Trust Fund Contribution Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change ☐ Addition BLOCK, JOHN NAME NAME 1202 HILLSBORO MILE STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change Addition KOUKOULIS, ANGELO NAME NAME 1203 HILLSBORO MILE STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition SAWTELLE, CELNDA NAME NAME 1203 HILLSBORO MILE STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BAUER, JOHN NAME NAME 1203 HILLSBORO MILE STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WINTERS, LINDA NAME 1203 HILLSBORO MILE STREET ADDRESS STREET ADDRESS HILLSBORO BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 12. 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 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 changed, or on an attachment with an address, with all other like empowered.

FILED