FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 11 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M85182** **(7)**

1. Corporation Name
MANASOTA SHORES CORP.

Principal Place of Business	Mailing Address
C/O F. THOMAS HOPKINS 2033 MAIN STREET, SUITE 600 SARASOTA FL 34237-6052	C/O F. THOMAS HOPKINS 2033 MAIN STREET, SUITE 600 SARASOTA FL 34237-6052

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **06/10/1988**
3a. Date of Last Report: **01/31/1994**

2. Principal Place of Business
21: C/O D. CRATH
22 Suite, Apt. #, etc.: #110
23 City & State: ENGLEWOOD, FL.
24 Zip: 34223
25 Country: U.S.A.

2a. Mailing Address
26: 5031 N. BEACH RD.
27 Suite, Apt. #, etc.:
28 City & State:
29 Zip:
30 Country:

4. FEI Number: **NOT APPLICABLE** ☐ 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BERGNER, ROBIN
% SULLIVAN & ASSOCIATES
1498 S. MCCALL ROAD
ENGLEWOOD FL 34223

10. Name and Address of New Registered Agent

91 Name: HAMMOND, CARLYE
92 Street Address (P.O. Box Number is Not Acceptable): 5031 N. BEACH RD #218
93: ~~ENGLEWOOD P.O. BOX 703 34223-0703~~
94 City: ENGLEWOOD FL 95 Zip Code: 34223

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: HAMMOND, CARLYE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	GREEN, DONALD G.	1.2 NAME	
STREET ADDRESS	4481 CONCORD PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON, CANADA	1.4 CITY-ST-ZIP	
TITLE	V.P.	2.1 TITLE	☐ Change ☐ Addition
NAME	DON CRATH	2.2 NAME	
STREET ADDRESS	RR#1 BOX A-62	2.3 STREET ADDRESS	
CITY-ST-ZIP	COLDWATER ONT. CAN. L0K1E0	2.4 CITY-ST-ZIP	
TITLE	SECRETARY/TREASURER	3.1 TITLE	☐ Change ☐ Addition
NAME	KEITH ALTMAS	3.2 NAME	
STREET ADDRESS	11 MAINLIGHT DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONT. CAN. M9A3L6	3.4 CITY-ST-ZIP	
TITLE	V.P.	4.1 TITLE	☑ Change ☐ Addition
NAME	BONNELL, MICHAEL	4.2 NAME	CRATH, DONALD
STREET ADDRESS	DELETED	4.3 STREET ADDRESS	RR#1 BOX A-62
CITY-ST-ZIP		4.4 CITY-ST-ZIP	COLDWATER, ONT. CAN. L0K1E0
TITLE	SECRETARY/TREASURER	5.1 TITLE	SEC/TREAS.
NAME	SMITH, CURT	5.2 NAME	ALTMAS, KEITH
STREET ADDRESS	DELETED	5.3 STREET ADDRESS	11 MAINLIGHT DR.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	TORONTO, ONT. CAN. M9A3L6
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DONALD CRATH 6MAR95 813-475-7991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CANADA - 705-681-3525

0043308 CP