

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Office of Corporations
Secretary of State
Office of Corporations
Tallahassee, Florida 32308

FILED

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NORTHSHIRE DEVELOPMENT PROPERTY OWNERS ASSOCIATION, INC.

900001547719
-07/27/95--01059--014

****155.00 ****155.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
3491-11 THOMASVILLE RD STE 153 TALLAHASSEE FL 32308		3491-11 THOMASVILLE RD STE 153 TALLAHASSEE FL 32308	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	12/20/1983	03/01/1994
22	27	4. FEI Number	Applied For
23	28	59-2650461	Not Applicable
24	29	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	30	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. The corporation has liability for intangible tax under S. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
FREESMEIER, RICHARD J 6082 WESSEX CT. TALLAHASSEE FL 32308		81 Name Tom Perren 82 Street Address (P.O. Box Number is Not Acceptable) 6120 PECKWICK RD 83 84 City TALLAHASSEE 85 Zip Code FL 32308	

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: *Tom Perren* 6/12/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PRESIDENT
NAME	FREESMEIER, RICHARD J	12 NAME	TOM PERREN
STREET ADDRESS	6082 WESSEX COURT	13 STREET ADDRESS	6120 PECKWICK RD
CITY, ST, ZIP	TALLAHASSEE FL	14 CITY, ST, ZIP	TALLAHASSEE, FL 32308
TITLE	TD	21 TITLE	VICE PRESIDENT
NAME	FREESMEIER, CATHY E	22 NAME	WILLIAM DAVIS
STREET ADDRESS	6082 WESSEX COURT	23 STREET ADDRESS	6075 ESSEX COURT
CITY, ST, ZIP	TALLAHASSEE FL	24 CITY, ST, ZIP	TALLAHASSEE FL 32308
TITLE	SD	31 TITLE	TREASURER
NAME	ROGERS, SHERRY	32 NAME	FROSTY SCHUNEMAN
STREET ADDRESS	7992 TENNYSON DR	33 STREET ADDRESS	6078 THACKERY DR.
CITY, ST, ZIP	TALLAHASSEE FL	34 CITY, ST, ZIP	TALLAHASSEE, FL 32308
TITLE		41 TITLE	SECRETARY
NAME		42 NAME	CHARLES FOGLEY
STREET ADDRESS		43 STREET ADDRESS	8045 TENNYSON DR
CITY, ST, ZIP		44 CITY, ST, ZIP	TALLAHASSEE FL 32308
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(a), 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 recorder 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: *Tom Perren* 6/12/95 904 222 7875

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR