FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

SHORES NEIGHBORHOOD WATCH, INC.						
SHUH	ES NEIGHBURHOUD WAT	CH, INC.				
Principal Place	Mailing Address	g Address			[### 01614 64614 # 4014 # 4044 64 # ## 6464 1601	
9200 Bonita Beach Rdste 204 P.O.Box 2207 Bonita Springs FL 33923		P.O.BOX 2207	9200 Bonita Beach Rd. Ste. 204 P.O.Box 2207 Bonita Springs FL 33923		2.0	
					3. Date Incorporated or Qualified 03/26/1984	3a. Date of Last Report 02/20/1995
2. Principal Pl	ace of Business	2a. Mailing Address	a. Mailing Address		4. FEI Number	Applied For
Enite Ant	#	26			65-0026775	Not Applicable
Suite, Apt.	#, ec	Suite, Apt. #, etc.	¬ · · · ·		5. Certificate of Status Desired	See Required
Orty & State	9	City & State	¬ '		6. Election Campaign Financing	\$5.00 May Be
Zip Country		Zip	·		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199 032,	
<u>4</u>	25 29		30		Florida Statutes	
Name and Address of Current Registered Agent					10. Name and Address of New Re-	gistered Agent
4500				81 Name		
SPEAR, JOHN D.			ļ	82 Street Addi	eet Address (P.O. Box Number is Not Acceptable)	
	ONITA BEACH RD.,STE.204		83			
PO BOX 2207 BONITA SPRINGS FL 33923			L			
DOMIN GITHINGS (E GOSES				84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	2 and 617,1508, Florida Statute	s, the abov	ve named corpor	ation submits this statement for the purpo	
familiar wit	th, and accept the obligations of, Seci	tion 617.0503, Florida Statutes.	ed by the c	orporation's boai	ation subtries this statement for the purple rd of directors. I hereby accept the appoin	ntment as registered agent. Lam
SIGNATURE						
12.	Signature, typed or printed name of registered agent OFFICERS AN	fland title if application (NO) ID DIRECTORS	It: Registered .	Agent signature recjuire		DATE
TITLE	P	DELETE 111		ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 EE Change Addition		
NAME	COLDALADEZ CONCOT		1 2 NA			C. Change C. Addition
STREET ADDRESS	88 - 9TH ST		1 3 STF	RÉET ADDRESS		
CITY-ST-ZIF	DONITA EDONICE EL		1.4 CIT	1 4 CITY - ST - ZIP		
TIFLE	V DELETE 21		2 1 111	LE		☐ Change ☐ Addition
NAME			2.2 NA	MÉ		
STREET ADDRESS	93 - 7TH ST		23 STF	REET ADORESS		
CHTY - ST - ZIP				TY - ST - ZIP		
TITLE			3 1 TIT			☐ Change ☐ Addition
NAME CIDICI ADDRESS			3.2 NA	_ i		
STREET ADDRESS CITY-ST-ZIP	174 2ND STREET BONITA SPRINGS FL			REFT ADDRESS		
TITLE			3 4. CH	TY-SI-ZIP		☐ Change ☐ Addition
NAME	NASH, ROBERT A.		4 2 NA			L_ Change Addition
STREET ADDRESS	99 - 9TH ST		4	REET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL			Y -ST - ZIP		
THTLE	D	DELETE 51TI				☐ Change ☐ Addition
NAME	JOHNSTON, RAYMOND	TON, RAYMOND 528		ME		
STREET ADDRESS	216 - 5TH STREET WEST		5 3 STF	REET ADORESS		
CITY-ST-ZIP	BONITA SPRINGS FL	The second secon		Y - \$1 - ZIP		
TITLE	D			LF .		Change Addition
NAME	BROWN, MAX		6 2 NAF	ME		
STREET ADDRESS	74 - 9TH ST		63 S F F	REET ADDRESS		
CITY - S7 - ZIP	BONITA SPRINGS FL		6 4 CIT	Y-ST-ZIP		

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)(k). Fiorida 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.

SIGNATURE: LOUGH TO SOME OF SIGNING OFFICER OR DIRECTOR

Jan 31, 1996 941-947-5039

CR2E037 (12/95)