


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

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| NONPROFIT CORPORATION ANNUAL REPORT 1996 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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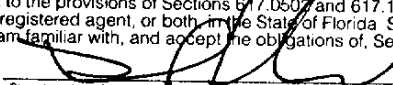
DOCUMENT # **N02729 (4)**
1. Corporation Name
TROPICAL SHORES NEIGHBORHOOD ASSOCIATION, INCORPORATED

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| Principal Place of Business % ROBERT B. KINNEY 456 22ND AVE. S.E. ST. PETERSBURG FL 33705 | Mailing Address % ROBERT B. KINNEY 456 22ND AVE. S.E. ST. PETERSBURG FL 33705 |
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| 2. Principal Place of Business 21 321 22nd Ave SE Suite, Apt. #, etc. 22 City & State St Petersburg FL 23 Zip 33705 24 Country Pinnelburg | | 2a. Mailing Address 26 321 22nd Ave S.E Suite, Apt. #, etc. 27 City & State St. Petersburg FL 28 Zip 33705 29 Country FL 30 | | 3. Date Incorporated or Qualified 04/25/1984 | 3a. Date of Last Report 04/26/1995 |
| 5. Certificate of Status Desired <input type="checkbox"/> | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | | Applied For Not Applicable | |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | 9. Name and Address of Current Registered Agent KINNEY, ROBERT B. 456 22ND AVENUE S.E. ST. PETERSBURG FL 33705 | | 10. Name and Address of New Registered Agent 81 Name DAVID SCHAUER 82 Street Address (P.O. Box Number is Not Acceptable) 321 22nd Ave SE 83 84 City St. Petersburg 85 Zip Code FL 33705 | |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE  DATE **6/1/96**

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| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P KINNEY, ROBERT B. 456 22ND AVE. S.E. ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | President DAVID SCHAUER 321 22nd Ave SE St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V JARDINE, EVANGELINE 2316 S. SHORE DR., E. ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | Barbara Morris - V-Pres 442 22nd Ave SE St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST CALVANI, THOMAS J 377 - 22 AVE., SE ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Treasurer Lester Wolff 414 22nd Ave SE St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MARCH, MICHAEL 414 - 22 AVE., SE ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | Sec. Mike Walker 453 22nd Ave SE St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WIEAND, ROBERT 2411 SUNRISE DR., SE ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | Director Jim Clark 2240 E Bay Isle Dr St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BUCHSTEINER, LOUIS 2316 TROPICAL SHORES D R., SE ST. PETERSBURG FL <input checked="" type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | Dir Joe Ashenbrenner 2470 Sunrise Dr SE St Petersburg FL 33705 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if amended, or on an attachment with an address.

SIGNATURE:  **DAVID Schauer** DATE **6/1/96** DAYTIME PHONE # **813 821 6843**

CR2E037 (3/96)