FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N24550

1. Corporation Name

NORTHSHORE NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business'

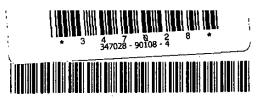
Mailing Address

P.O. BOX 8637 WEST PALM BEACH FL 33407 P.O: BOX 8637

WEST PALM BEACH FL 33407

FILED Apr 16, 1999 8:00 am Secretary of State

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							1						
2. Principal P	pal Place of Business 2a. Mailing Address 26							corporate /1988	ed or Qualifed		•		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			4. FEI Number				Applied For			
22	نىدا سىمىلىن ئىرىكىدى ئارىكىدىسى كارىكىدىسى ئارىكىدى ئارىكى ئارىكى ئارىكى ئارىكى ئارىكى ئارىكى ئارىكى ئارىكى ئ ئارىكى ئارىكى ئارىك	27	error - American State (1881) - Anni Anni Anni		<u></u>		59-26	79072			`		Applicable
City & Star	te	28	City & State			- 11	5. Certificate of Status Desired			\$8.75 Additional Fee Required			
Zip	Country	Country			6. Election	Campa	ign Financing		\$5	.00 A	lay Be		
24	25	29	[3	30			Trust F	und Con	tribution		Ac	ided to	Fees
	9. Name and Address of Curren	t Regis	stered Agent				10. Name	and Add	ress of New F	Registered A	Agent		
				81	1	Name							
HICKS F	REDERICK C			82	,	Street Add	dress (P.O. Box	Number	is Not Accepta	able)			
HICKS, FREDERICK C. 3501 NORTH AUSTRALIAN AVENUE					82 Street Address (P.O. Box Number is Not Acceptable)								
	LM BEACH FL 33407			83	3								_
WEST FA	EW BEACH PE 33407				_				1		loc l	Zip C	
	•			84	4	City			*	FL	85	ZIP C	one
office or i	to the provisions of Sections 617.050 registered agent, or both, in the State	ot Flora	da. Such change was au	tnonzed by	VΠ	named cor he corpora	rporation submit tion's board of d	s this sta irectors.	tement for the I hereby accep	purpose of of the appoir	changi ntment	ng its r as reg	egistered stered
agent. I a	am familiar with, and accept the obligation	tions of	r, Section 617.0503, Flori	oa Statute	5.				*				
SIGNATURE	Signature, typed or printed name of registered ager	of and 8161 -	if applicable /NOTE: I	Registered An	ant i	signature recur	ired when reinstating)			DATE			
12.	OFFICERS AN			13.	O.A.	agrazoro rodo.		NS/CHA	NGES TO OF		D DIR	ECTO	S IN 12
TITLE	PD	1.1 TITLE	1.1 TITLE						Ch	ange	Addition		
NAME	HICKS, FREDERICK			1.2 NAME	:								
	ACCUSE AND ADDRESS AND AND ADDRESS AND ADD			ADORESS									
STREET ADORESS			_	1.4 CITY-			. / N			• •			_
CITY-ST-ZIP	WEST PALM BEACH FL		DOELETE	2.1 TITLE	_	-215			Roa	ام	□ Ch	ange	Additio
TITLE	VD			2.2 NAME			Sim	0N	1200	Ch		•	
NAME	JACKSON, AUBREY					ADDRESS	<u>ାଜ୍ୟ</u>	į i	10th '	St			
STREET ADDRESS	10.0				_		w.F	· /3.	FL,				
CITY-ST-ZIP	WPB FL		DELETE	2.4 CITY-	_		<u> </u>) 		□ Ch	ange	Addition
me' _	VD DOMENT A		- Deterie	3.2 NAME								•	
NAME	DIXON, RONNIE M.					ADDOESC							,
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP	WEST PALM BEACH FL	·····	☐ DELETE	3.4. CITY-		1-411					ПС	ange	☐ Addition
TITLE	TD C DADBY			4. 2 NAME							_	•	
NAME	RANK JR. G. BARRY	- N II 45"				ADDRESS							•
STREET ADDRESS		INUE				ADDRESS							
CITY-ST-ZIP	WEST PALM BEACH FL		DELETE	4.4 CITY- 5.1 TITLE		- <u>71</u> P					ПС	ange	Addition
TITLE			□ nere≀e	5.1 IIILE 5.2 NAME									
NAME						ADDRESS						•	
STREET ADDRESS	8												
CITY-ST-ZIP				5.4 CITY- 6.1 TITLE		-2112				 :	□ Ct	anne	Addition
TITLE			☐ DELETE	•					٠			iai igo	□ vidouoi
NAME	,			6.2 NAME									
STREET ADDRESS	· ·					ADDRESS							
CITY ST 78D				6.4 CITY-	ST-	-ZIP							

14. 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 annual report of supplemental annual report is fine and factor 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 seceiver 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 any fractment with an address, with all other like empowered.

SIGNATURE: