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FILED

Mar 31 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N47142 (7)

1. Corporation Name

SHADY HAVEN ASSOCIATION, INC.

Principal Place of Business

150 OLD ENGLEWOOD RD  
#90  
ENGLEWOOD FL 34223  
US

Mailing Address

333 SOUTH TAMiami TR  
SUITE 199  
VENICE FL 34285-2479  
US3. Date Incorporated or Qualified  
02/03/19923a. Date of Last Report  
04/12/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

Country

29

30

4. FEI Number

65-0394069

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be  
Added to Fees8. This 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

KORP, WILLIAM R.  
333 SOUTH TAMiami TRAIL  
SUITE 199  
VENICE FL 34285

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

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 ☐ DELETE  
NAME BERNSTEN, FRED  
STREET ADDRESS 150 OLD ENGLEWOOD RD  
CITY-ST-ZIP ENGLEWOOD FL 34223TITLE D ☐ DELETE  
NAME ANDERSON, KEITH  
STREET ADDRESS 150 OLD WNGLEWOOD RD  
CITY-ST-ZIP ENGLEWOOD FL 34223TITLE SD ☐ DELETE  
NAME CAMPBELL, GRACE  
STREET ADDRESS 150 OLD ENGLEWOOD ROAD  
CITY-ST-ZIP ENGLEWOOD FL 34223TITLE D ☒ DELETE  
NAME RUPLI, WALTER  
STREET ADDRESS 150 OLD ENGLEWOOD ROAD  
CITY-ST-ZIP ENGLEWOOD FLTITLE D ☒ DELETE  
NAME TADSEN, WILLIAM  
STREET ADDRESS 150 OLD ENGLEWOOD ROAD  
CITY-ST-ZIP ENGLEWOOD FLTITLE TD ☐ DELETE  
NAME WILKINSON, ARTHUR  
STREET ADDRESS 150 OLD ENGLEWOOD ROAD  
CITY-ST-ZIP ENGLEWOOD FL 342231.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME BEDALOV, JOHN  
1.3 STREET ADDRESS 150 OLD ENGLEWOOD RD  
1.4 CITY-ST-ZIP ENGLEWOOD, FL 342232.1 TITLE VD ☐ Change ☒ Addition  
2.2 NAME ROSE, HERBERT  
2.3 STREET ADDRESS 150 OLD ENGLEWOOD RD  
2.4 CITY-ST-ZIP ENGLEWOOD, FL 342233.1 TITLE D ☐ Change ☒ Addition  
3.2 NAME HOETLER, WALTER  
3.3 STREET ADDRESS 150 OLD ENGLEWOOD RD  
3.4 CITY-ST-ZIP ENGLEWOOD, FL 342234.1 TITLE D ☐ Change ☒ Addition  
4.2 NAME PACK, VIRGIL  
4.3 STREET ADDRESS 150 OLD ENGLEWOOD RD  
4.4 CITY-ST-ZIP ENGLEWOOD, FL 342235.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME SCHLOSSER, BEVERLY  
5.3 STREET ADDRESS 150 OLD ENGLEWOOD RD  
5.4 CITY-ST-ZIP ENGLEWOOD, FL 342236.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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, changed, or on an attachment with an address.

SIGNATURE:

FRED BERNSTEN, PRESIDENT

MARCH 24 1997 941-475-0690

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0084443

CR2E037 (9/96)