FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLOR-DA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

N94000001798 (7)

KISSIMMEE SHORES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address 2044 HiBISCUS CT 2044 HIBISCUS CT						
SANFORD FL		2044 HIBISCUS CT SANFORD FL 32771				
					3. Date Incorporated or Qualified	
2. Principal P 1	Place of Business	2a. Mailing Address		,	4. FEI Number Applied For	
Suite, Apt	#. etc	Suite, Apt. #, etc.			59-3304855 Not Applicable	
2		27			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Star	· · · · · · · · · · · · · · · · · · ·	City & State		· ·	6. Election Campaign Financing \$5.00 May Re	
il		28			Trust Fund Contribution Added to Fees	
- 7p .]	Country 25	Ζφ	Country	,	8. This corporation has liability for intangible tax under s. 199 032,	
	9. Name and Address of Curre	29 29 Agent	30		Flonda Statutes Yes No 10. Name and Address of New Registered Agent	
			81	Name	10. Name and Address of New Neglitered Agent	
KIRCHH	IOFF, WILLIAM E		00		/DO D	
2044 HIBISCUS CT			82	Softeed A	Additions (P.O. Box Number is Not Acceptable)	
SANFOR	RD FL 32771		83	T		
			84	City	85 Zip Gode	
				1	FL 85 Zip Code orporation submits this statement for the purpose of changing its registered officers.	
2 .	Striction Specifier and strained representation of a PD PD	ND DIRECTORS	13.	1 3 (1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN TZ	
OTE AME	KIRCHHOFF, WILLIAM E	□ DETEIF	1 TITLE		☐ Change ☐ Addition	
rae - L'Abretos	2044 HIBISCUS CT		1.2 NAME 1.3 STREET	ADDDESS		
Ir SI-ZP	SANFORD FL 32771		1.4 CiTY - 5			
lı:	VD	DELETE	2 1 T-TEF		☐ Change ☐ Addition	
Mt	KIRCHHOFF, CAROLE A		2.2 NAME			
DECETABLISES	2044 HIBISCUS CT SANFORD FL 32771		2.3 STHEET			
15,51,20 10	STD	DELETE	2 4 Cilly - 3 1 Tille	S1 - 20F	Change Addition	
-Mi	GREGORY, ROBERT K JR		3 2 NAME			
THEF ACCURESS	1800 SANFORD AVE		3 3 \$!REF!	ADDRESS		
iv si ze	SANFORD FL 32771		3.4 CITY-	ST-ZIP		
i.f		DELETE	4 1 TITLE		☐ Change ☐ Addition	
Mil BEELAGDBLSS -			4 2 NAME	400000		
19 S1 Ziệ			4.3 STREET 4.4 CITY - S			
Hf		DELETE	5171111		☐ Change ☐ Addition	
:M·			5.2 NAME			
жен АФ[вийов			5.3 STREET	ADDRESS		
Tr. ST-Z-P LEE		Fibrica	5 4 CITY - S	I - 7IP		
M:		□ DELFTE	61 11116		☐ Crange ☐ Addition	
NAC TREET ADORESS			6.2 NAME 6.3 STREET	ADDRESS		
TY SE ZW			6 3 STREET 6 4 CITY - S			
	y certify that the information supplied	with this filing is voluntarily furn	nished and doe	s not qual	I	

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 cath, that I am an officer or director of the corporation or the receiver or trustee en powered 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: [4

1-13-96 407-322-7015