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Mar 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000004800 (8)**

1. Corporation Name

SHELBY PLACE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1350 ORANGE AVENUE
WINTER PARK FL 32782**

**1350 ORANGE AVENUE
WINTER PARK FL 32782**

2. Principal Place of Business

2a. Mailing Address

21 1350 ORANGE AVE

26 P.O. BOX 1208

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 100

27 ~~1350 ORANGE AVE~~

City & State

City & State

23 WINTER PARK, FL

28 WINTER PARK FL

Zip

Zip

Country

Country

24 32789

25 USA

29 32790

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/28/1994

4. FEI Number

65-0563546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**PHILLIPS, ROGER V
1350 ORANGE AVENUE
WINTER PARK FL 32782**

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 **ROGER V PHILLIPS**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VTD** ☒ DELETE
NAME **CARLETON, CALLIS**
STREET ADDRESS **2801 S BAYSHORE DRIVE**
CITY-ST-ZIP **MIAMI FL**

TITLE **VSD** ☒ DELETE
NAME **GOLDMAN, JOEL K**
STREET ADDRESS **2801 S. BAYSHORE DRIVE**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **PD** ☒ DELETE
NAME **KANTIZ, KARL**
STREET ADDRESS **2801 S. BAYSHORE DRIVE**
CITY-ST-ZIP **MIAMI FL**

TITLE **VAS** ☒ DELETE
NAME **JEFFREY, THOMAS W**
STREET ADDRESS **2801 SOUTH BAYSHORE DRIVE**
CITY-ST-ZIP **MIAMI FL 33133-2481**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **CHARLES RISTER**
1.3 STREET ADDRESS **2312 FINWICK CT**
1.4 CITY-ST-ZIP **KISSIMMEE, FL 34743**

2.1 TITLE **VPD** ☒ Change ☐ Addition
2.2 NAME **JAIME ACOSTA-GRUBB**
2.3 STREET ADDRESS **2506 SHELBY CIRCLE**
2.4 CITY-ST-ZIP **KISSIMMEE, FL 34743**

3.1 TITLE **STD** ☒ Change ☐ Addition
3.2 NAME **PAUL KYGER JR**
3.3 STREET ADDRESS **2304 FINWICK CT**
3.4 CITY-ST-ZIP **KISSIMMEE FL 34743**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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: 

CHARLES RISTER, PRES 2/6/98

644-4500

CR2E037 (10/97)