FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000028421 (4)**

1. Corporation Name
SHOREWOOD FINANCIAL, INC.

Principal Place of Business	Mailing Address
1901 W CYPRESS CREEK RD SUITE 300 FT LAUDERDALE FL 33309	1901 W CYPRESS CREEK RD SUITE 300 FT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/16/1993
3a. Date of Last Report: 03/31/1994

2. Principal Place of Business
21 5700 LAKE WORTH ROAD
Suite, Apt. #, etc.
22 SUITE 310
City & State
23 LAKE WORTH, FLORIDA
Zip 24 33463 Country 25 PALM BEACH

2a. Mailing Address
26 P.O. BOX 5448
Suite, Apt. #, etc.
27
City & State
28 LAKE WORTH, FLORIDA
Zip 29 33466-5448 Country 30 PALM BEACH

4. FEI Number: 65-0405707 ☐ 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LEWIS, RICHARD C
799 BRICKELL PLAZA
SUITE 702
MIAMI FL 33131

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☒ Change ☐ Addition
NAME	SHAPIRO, ALBERT	1.2 NAME	SHAPIRO, ALBERT	
STREET ADDRESS	1901 W CYPRESS CREEK RD #300	1.3 STREET ADDRESS	5700 LAKE WORTH ROAD, SUITE 310	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	1.4 CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	SHAPIRO, HONORA	2.2 NAME	SHAPIRO, HONORA	
STREET ADDRESS	1901 W CYPRESS CREEK RD S300	2.3 STREET ADDRESS	5700 LAKE WORTH ROAD, SUITE 310	
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	SVPT	3.1 TITLE	SVPT	☒ Change ☐ Addition
NAME	ROGERS, JAMES M	3.2 NAME	ROGERS, JAMES M	
STREET ADDRESS	1901 W CYPRESS CREEK RD S300	3.3 STREET ADDRESS	5700 LAKE WORTH ROAD, SUITE 310	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	VPS	4.1 TITLE	VPS	☒ Change ☐ Addition
NAME	GLYNOS, SUSAN M	4.2 NAME	GLYNOS, SUSAN M	
STREET ADDRESS	1901 W CYPRESS CREE RD S300	4.3 STREET ADDRESS	5700 LAKE WORTH ROAD, SUITE 310	
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	LAKE WORTH, FL 33463	
TITLE	AVP	5.1 TITLE		☐ Change ☐ Addition
NAME	GUTMANIS, PATRICIA	5.2 NAME	DELETE	
STREET ADDRESS	1901 W CYPRESS CREEK RD S300	5.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	5.4 CITY-ST-ZIP		
TITLE	AVPC	6.1 TITLE	AVPC	☒ Change ☐ Addition
NAME	WELLINGTON, GRAHAM P	6.2 NAME	WELLINGTON, GRAHAM P	
STREET ADDRESS	1901 W CYPRESS CREEK RD S300	6.3 STREET ADDRESS	5700 LAKE WORTH ROAD, SUITE 310	
CITY-ST-ZIP	FT LAUDERDALE FL	6.4 CITY-ST-ZIP	LAKE WORTH, FL 33463	

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

SIGNATURE: Stephen M Rogers 4-27-95 407-432-0811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0017424 CP