


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90095 010 \*\*\*\*61.25

**DOCUMENT # 751991**

1. Entity Name  
 SHORE SIDE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business  
 ASSOCIATED PROPERTY MGMT.  
 1928 LAKE WORTH RD.  
 LAKE WORTH, FL 33461

Mailing Address  
 ASSOCIATED PROPERTY MGMT.  
 1928 LAKE WORTH RD.  
 LAKE WORTH, FL 33461



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

02202008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number  
 59-2040379

Applied For  
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 ASSOCIATED PROPERTY MANAGEMENT  
 1928 LAKE WORTH RD.  
 LAKE WORTH, FL 33461

7. Name and Address of New Registered Agent  
 Name: EDWARD DICKER, ESQUIRE  
 Street Address (P.O. Box Number is Not Acceptable): 1818 AUSTRALIAN AVE. SOUTH  
 Suite 400  
 City: West Palm Beach FL Zip Code: 33409

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	TILIUS, LASSE	
STREET ADDRESS	720 NO. DIXIE HWY #201	
CITY-ST-ZIP	LANTANA, FL 33462	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MAKKONEN, AARO	
STREET ADDRESS	720 NO. DIXIE HWY #201	
CITY-ST-ZIP	LANTANA, FL 33462	
TITLE	STD	<input type="checkbox"/> Delete
NAME	JONES, RICHARD	
STREET ADDRESS	720 NO. DIXIE HWY #702	
CITY-ST-ZIP	LANTANA, FL 33462	
TITLE	D	<input type="checkbox"/> Delete
NAME	SIIKANEN, PENTTI	
STREET ADDRESS	232 GLEN EAGLES DR.	
CITY-ST-ZIP	ATLANTIS, FL 33462	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lasse Tilius*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 04/14-2008 Daytime Phone #: 561-540-8888