

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003985

FILED
Feb 05, 2010
Secretary of State

Entity Name: THE SHORES AT VICTORIA ISLES ASSOCIATION, INC.

Current Principal Place of Business:

1750 UNIVERSITY DRIVE
SUITE #205
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1750 UNIVERSITY DRIVE
SUITE #205
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-1037185 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SWIFT MANAGEMENT SOLUTIONS
1750 UNIVERSITY DRIVE
#205
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TD
Name: GOLDBERG, LENNY
Address: 5737 NW 49 LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D
Name: HELLMAN, JENNIE
Address: 5726 NW 49 WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: PD
Name: SHULMAN, NORMAN
Address: 4848 NW 58 PLACE
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD
Name: ROONEY, PAUL
Address: 4823 NW 59 COURT
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD
Name: RUSSO, CORRIE
Address: 5715 NW 49 WAY
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NORMAN SHULMAN

PD

02/05/2010

Electronic Signature of Signing Officer or Director

Date