

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003985

FILED  
Jan 19, 2012  
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: PD  
Name: SHULMAN, NORMAN  
Address: 4848 NW 58TH PLACE  
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: SD  
Name: RUSSO, CORRIE  
Address: 5715 NW 49TH WAY  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD  
Name: ROONEY, PAUL  
Address: 4823 NW 59 COURT  
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

01/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date