

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006404

FILED  
Feb 21, 2005  
Secretary of State

**Entity Name:** SHAKETT ISLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

854 HILLCREST DR  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 222  
LAUREL, FL 34272

**New Mailing Address:**

**FEI Number:** 65-0794345

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONTER, PAUL  
898 HILLCREST DRIVE  
NOKOMIS, FL 34275 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: PTD ( ) Delete  
Name: SALENTINE, DAVID L  
Address: 854 HILLCREST DRIVE  
City-St-Zip: NOKOMIS, FL 34275

Title: VD ( ) Delete  
Name: PETERSON, DAVID  
Address: 858 HILLCREST DR.  
City-St-Zip: NOKOMIS, FL 34275

Title: SD ( ) Delete  
Name: GONTER, PAUL  
Address: 898 HILLCREST DRIVE  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID SALENTINE

PTD

02/21/2005

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

\_\_\_\_\_  
Date