

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02546

FILED
Feb 08, 2011
Secretary of State

Entity Name: NORTH SHORE COURTYARD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

390 WEST STATE RD. 434
SUITE 203
LONGWOOD, FL 327504977 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 197043
WINTER SPRINGS, FL 32719 US

New Mailing Address:

FEI Number: 59-2523083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMERSTON, LLC
390 WEST S.R. 434 STE.203
LONGWOOD, FL 327504977 US

Name and Address of New Registered Agent:

PALMERSTON, LLC
390 WEST S.R. 434
STE 203
LONGWOOD, FL 327504977 US

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:

02/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SWINGLE, KAREN
Address: 844 WESTSHORE COURT
City-St-Zip: CASSELBERRY, FL 32707

Title: S
Name: JUDY, ST. MICHAEL
Address: 137 NORTSHORE CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: T
Name: SENTIFF, ANNE
Address: 872 BAY LAKE COURT
City-St-Zip: CASSELBERRY, FL 32707

Title: D
Name: RIEBEL, RUTH
Address: 158 NORTSHORE CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: V
Name: PAULDINE, GENE
Address: 916 ASHLEY COURT
City-St-Zip: CASSELBERRY, FL 32707

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: KAREN SWINGLE

P

02/08/2011

Electronic Signature of Signing Officer or Director

Date