

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715392

Entity Name: THE SHORE VIEW ASSOCIATION, INC.

Current Principal Place of Business:

9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE 301
ST. PETERSBURG, FL 33702 US

FEI Number: 59-1278151

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC.
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GAMBINO, PERRY
Address C/O ASSOCIA GULF COAST
 9887 4TH ST N STE 301
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER
Name HAY, JEANNE
Address C/O ASSOCIA GULF COAST
 9887 FOURTH STREET NORTH SUITE
 301
City-State-Zip: ST. PETERSBURG FL 33702

Title VP, 2ND
Name REED, RICHARD
Address C/O ASSOCIA GULF COAST
 9887 FOURTH STREET NORTH SUITE
 301
City-State-Zip: ST. PETERSBURG FL 33702

Title VP
Name SMITH , RICHARD
Address C/O ASSOCIA GULF COAST
 9887 FOURTH STREET NORTH SUITE
 301
City-State-Zip: ST. PETERSBURG FL 33702

Title SECRETARY
Name LOVE, DOROTHY
Address C/O ASSOCIA GULF COAST
 9887 FOURTH STREET NORTH SUITE
 301
City-State-Zip: ST. PETERSBURG FL 33702

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: PERRY GAMBINO

PRESIDENT

04/07/2016

Electronic Signature of Signing Officer/Director Detail

Date