

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727647

**Entity Name:** SHORELINE TOWERS PHASE I CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC9855202947****Current Principal Place of Business:**900 GULF SHORE DR.  
DESTIN, FL 32541**Current Mailing Address:**P.O. BOX 414  
DESTIN, FL 32540 US**FEI Number: 59-1647251****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NEWMAN, JR., RAYMOND F  
PARADISE VILLAGE  
348 MIRACLE STRIP PKWY STE. 7  
FORT WALTON BEACH, FL 32548 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	PD
Name	O'BRIEN, GREGORY
Address	900 GULF SHORE DRIVE #1021
City-State-Zip:	DESTIN FL 32541

Title	VP
Name	GINGER, WILLIAM
Address	900 GULF SHORE DR #1072
City-State-Zip:	DESTIN FL 32541

Title	DT
Name	PALOTTA, FREDERICK
Address	251 HUNTING CREEK DR
City-State-Zip:	MARIETTA GA 30068

Title	D
Name	TALLENT, TERRY
Address	900 GULF SHORE DRIVE #3055
City-State-Zip:	DESTIN FL 32540

Title	D
Name	MICHEU, ANTHONY II
Address	4001 JEAN LAFIETTE PKWY
City-State-Zip:	CHALMETTE LA 70043

Title	D
Name	EALEY, GARY
Address	176 E. MOLLY WALTON DR
City-State-Zip:	HENDERSON TN 37075

*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: WILLIAM GINGER****VP****04/15/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date