

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727647

FILED
Apr 30, 2018
Secretary of State
CC9913972943

Entity Name: SHORELINE TOWERS PHASE I CONDOMINIUM ASSOCIATION, INC.

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: Yes

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF P.A.
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: JAY ROBERTS

04/30/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SAACKS, JUNE
Address 200 CANE COURT
City-State-Zip: COVINGTON LA 70433

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

Title SECRETARY
Name MEYER, TOM
Address 1003 REGENCY MANOR DRIVE
City-State-Zip: BALLWIN MO 63011

Title TREASURER
Name SPRINGFIELD, JIM
Address 12301 198TH AVE. NE
City-State-Zip: WOODINVILLE WA 98077

Title VP
Name DORNAN, WALTER
Address 2808 VERONICA DRIVE
City-State-Zip: CHALMETTE LA 70043

Title DIRECTOR
Name MCMAHON, MICHAEL
Address 2195 MILLVALE ROAD
City-State-Zip: LOUISVILLE KY 40205

Title ASST. SECRETARY
Name MEANS, MARIA
Address 108 BLOSSOM CREEK RUN
City-State-Zip: NICEVILLE FL 32578

Title ASST. TREASURER
Name DUNCAN, LINDON
Address 280 HILLTOP MEADOWS
City-State-Zip: JACKSON MO 63755

Continues on page 2

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: MARIA MEANS

ASST. SECRETARY

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WHITE, NORMAN
Address 7211 HARTLAND AVE.
City-State-Zip: HOUSTON TX 77055