

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727647

**Entity Name:** SHORELINE TOWERS PHASE I CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Apr 27, 2020**  
**Secretary of State**  
**3022841496CC****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****04/27/2020**

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            VP  
Name           TALLENT, TERRY  
Address        900 GULF SHORE DRIVE #3055  
City-State-Zip: DESTIN FL 32541

Title            SECRETARY  
Name           MARCUS, ELLIOT  
Address        900 GULF SHORE DRIVE #1026  
City-State-Zip: DESTIN FL 32541

Title            DIRECTOR  
Name           KASTL, FRANK  
Address        3554 SORREL TREE LANE  
City-State-Zip: ST. LOUIS MO 63129

Title            DIRECTOR  
Name           DAY, CAMERON  
Address        900 GULF SHORE DRIVE #2076  
City-State-Zip: DESTIN FL 32541

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

Title            TREASURER  
Name           DOUGLAS, KEN  
Address        200 HOVIS FARM RD.  
City-State-Zip: PARK HILLS MO 63601

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

*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: JUNE SAACKS****PRESIDENT****04/27/2020**

Electronic Signature of Signing Officer/Director Detail

Date