

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735425

Entity Name: THE SHUTTERS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4227 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**4227 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 US**FEI Number:** 59-1833567**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILLEY & WYANT-CORTEZ, P.A.
840 US HIGHWAY ONE
SUITE 345
NORTH PALM BEACH, FL 33408 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	TREASURER, DIRECTOR
Name	POLLACK, CRAIG
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	VICE PRESIDENT, DIRECTOR
Name	MAIONE, DENISE
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	PRESIDENT, DIRECTOR
Name	HOUGHTON, DAVID C
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	SECRETARY, DIRECTOR
Name	RIEGEL, PATRICK
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DIRECTOR
Name	MISSROON, HELEN
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

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: DAVID HOUGHTON

PRESIDENT

03/06/2015

Electronic Signature of Signing Officer/Director Detail_____
Date