#### 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: JAMES G. COLEMAN

Electronic Signature of Signing Officer/Director Detail

PD

#### 03/20/2013

Date

# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **DOCUMENT# 759154**

### Entity Name: NORTH SHORE BUILDING CONDOMINIUM ASSOCIATION, INC.

### **Current Principal Place of Business:**

C/O BUD COLEMAN ASSOCIATES, INC. 4060 TAMIAMI TRAIL N., STE 1 NAPLES, FL 34103

### **Current Mailing Address:**

C/O BUD COLEMAN ASSOCIATES, INC. 4060 TAMIAMI TRAIL N., STE 1 NAPLES, FL 34103

#### FEI Number: 59-2659303

## Name and Address of Current Registered Agent:

COLEMAN, JAMES G 333 CUDDY COURT NAPLES, FL 34103 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

#### **Officer/Director Detail :**

| Title           | PD                 | Title           | SD                     |
|-----------------|--------------------|-----------------|------------------------|
| Name            | COLEMAN, JAMES G   | Name            | COLEMAN, RAMONA G      |
| Address         | 333 CUDDY COURT    | Address         | 333 CUDDY COURT        |
| City-State-Zip: | NAPLES FL 34103    | City-State-Zip: | NAPLES FL 34103        |
| Title           | D                  | Title           | D                      |
| Name            | COLEMAN, JAMES S   | Name            | VANDERHEYDEN, TERRY DR |
| Address         | 234 MERMAIDS BIGHT | Address         | 4060 N TAMIAMI TR      |
| City-State-Zip: | NAPLES FL 34103    | City-State-Zip: | NAPLES FL 34103        |
| Title           | D                  | Title           | D                      |
| Name            | LUISI, BART DR     | Name            | DELEON, AL DR          |
| Address         | 4060 N TAMIAMI TR  | Address         | 4060 N TAMIAMI TR      |
| City-State-Zip: | NAPLES FL 34103    | City-State-Zip: | NAPLES FL 34103        |

Certificate of Status Desired: No

#### FILED Mar 20, 2013 Secretary of State CC6867784063

Date