

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06008

**Entity Name:** SHORELANDS WEST HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O RALPH L. EVANS, ESQ.  
756 BEACHLAND BLVD.  
VERO BEACH, FL 32963**Current Mailing Address:**P O BOX 643741  
VERO BEACH, FL 32964 US**FEI Number:** 59-2533808**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EVANS, RALPH L  
756 BEACHLAND BLVD.  
VERO BEACH, FL 32963 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:** RALPH L. EVANS

03/04/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ANDERSON, ROLAND F  
Address 1415 SHORELANDS DRIVE NORTH  
City-State-Zip: VERO BEACH FL 32963

Title VP  
Name ZOCK, LISA M  
Address 1365 SHORELANDS DR N  
City-State-Zip: VERO BEACH FL 32963

Title TREASURER  
Name ANDERSON, TACIE J  
Address 1415 SHORELANDS DR. N  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR  
Name TATE, CORI  
Address 1425 SHORELANDS DR. WEST  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR  
Name FENNELL, KATHY  
Address 1435 SHORELANDS DRIVE WEST  
City-State-Zip: VERO BEACH FL 32963

Title PRESIDENT  
Name BLACK, LISA  
Address 1395 SHORELANDS DR. N.  
City-State-Zip: VERO BEACH FL 32963

Title SECRETARY  
Name HRYWNAK, MARY ANN  
Address 1435 SHORELANDS DR. N.  
City-State-Zip: VERO BEACH FL 32963

*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:** TACIE J. ANDERSON

SECRETARY

03/04/2022

Electronic Signature of Signing Officer/Director Detail

Date