## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12753

Entity Name: SHOREWALK PALMS CONDOMINIUM ASSOCIATION, INC.

**FILED** May 14, 2015 **Secretary of State** CC8763840582

Date

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

4502 46TH AVENUE W BRADENTON, FL 34210

## **Current Mailing Address:**

4502 46TH AVE. WEST BRADENTON, FL 34210 US

FEI Number: 59-2673319 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SPOON, LUCY 4502 46TH AVE WEST BRADENTON, FL 34210 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: LUCY SPOON 05/14/2015

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

Title **OFFICER** Title VΡ

POVEY, ERIC Name ALARY, GERRY Name

Address 4302 46TH AVENUE W #103 Address PO BOX 1355

720 HOLLY ROAD City-State-Zip: **BRADENTON FL 34210** 

City-State-Zip: ANNA MARIA FL 34216

Title DT Title DS

Name DUMAS, DAN Name TREPANIER, YVES

Address 4301 46TH AVENUE W #204 4315 45TH AVENUE W #201 Address **BRADENTON FL 34210** City-State-Zip:

BRADENTON FL 34210 City-State-Zip:

Title **OTHER** Title **OFFICER** 

Name SPOON, LUCY Name POVEY, HELEN Address 401 B 63RD ST.

Address PO BOX 1355 City-State-Zip: HOLMES BEACH FL 34217

720 HOLLY ROAD ANNA MARIA FL 34216

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.

05/14/2015 SIGNATURE: LUCY SPOON **FACILITIES** COORDINATOR

Electronic Signature of Signing Officer/Director Detail

Date