## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22390

Entity Name: SHALIMAR POINTE OWNERS ASSOCIATION, INC.

FILED
Jan 09, 2023
Secretary of State
5231777219CC

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

**BOX 1096** 

SHALIMAR, FL 32579

## **Current Mailing Address:**

P O BOX 1096

SHALIMAR, FL 32579 US

FEI Number: 59-3139893 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KOHLER, VICTORIA BOX 1096 SHALIMAR, FL 32579 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: VICTORIA KOHLER 01/09/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY Title PRESIDENT

Name KOHLER, VICTORIA Name NEWMAN, RAYMOND

Address P O BOX 1096 Address P O BOX 1096

City-State-Zip: SHALIMAR FL 32579 City-State-Zip: SHALIMAR FL 32579

TitleDIRECTORTitleTREASURERNameEVANS, DENNYNameVILLA, RICHARD

Address P O BOX 1096 Address BOX 1096

City-State-Zip: SHALIMAR FL 32579 City-State-Zip: SHALIMAR FL 32579

Title VP

Name DOUGLAS, WILLIAM

Address P O BOX 1096

City-State-Zip: SHALIMAR FL 32579

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: WILLIAM A DOUGLAS

Electronic Signature of Signing Officer/Director Detail

VP 01/09/2023

Date