2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000002011

Sep 20, 2019 Secretary of State 7305952237CC

FILED

Entity Name: THE SHORES AT BERKSHIRE LAKES MASTER HOMEOWNER'S

ASSOCIATION, INC.

Current Principal Place of Business:

C/O ANCHOR ASSOCIATES, INC. 3940 RADIO ROAD SUITE 112 NAPLES, FL 34104

Current Mailing Address:

C/O ANCHOR ASSOCIATES, INC. 3940 RADIO ROAD SUITE 112 NAPLES, FL 34104 US

FEI Number: 65-0893684 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANCHOR ASSOCIATES, INC. 3940 RADIO ROAD SUITE 112 NAPLES, FL 34104 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: BRAD PHELPS 09/20/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitleDIRECTORTitleTREASURERNameMASON, DELIANameMYRON, LINDA

Address C/O ANCHOR ASSOCIATES, INC. Address C/O ANCHOR ASSOCIATES, INC. 3940 RADIO ROAD SUITE 112 3940 RADIO ROAD SUITE 112

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

 Title
 VP
 Title
 DIRECTOR

 Name
 NELSON, DOUG
 Name
 LAROSE, JACK

Address C/O ANCHOR ASSOCIATES, INC. Address C/O ANCHOR ASSOCIATES, INC. 3940 RADIO ROAD SUITE 112 3940 RADIO ROAD SUITE 112

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title DIRECTOR Title PRESIDENT

Name TAYLOR, RONALD Name VACCARINO, TONY

Address C/O ANCHOR ASSOCIATES, INC. Address C/O ANCHOR ASSOCIATES, INC.

3940 RADIO ROAD SUITE 112 3940 RADIO ROAD SUITE 112

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title SECRETARY
Name SWIFT, KAREN

Address C/O ANCHOR ASSOCIATES, INC.

3940 RADIO ROAD SUITE 112

City-State-Zip: NAPLES FL 34104

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: TONY VACCARINO PRESIDENT 09/20/2019