2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710300

FILED Apr 29, 2008 Secretary of State

Entity Name: AQUALANE SHORES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P. O. BOX 1724 NAPLES, FL 34106 US **Current Mailing Address: New Mailing Address:** P. O. BOX 1724 NAPLES, FL 34106 US FEI Number: 65-0125230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PINHOLSTER, JOHN 1969 7TH STREET SOUTH NAPLES, FL 34102 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: 1VP () Change () Addition () Delete PINHOLSTER, ALLISON Name: Name: 1969 7TH STREET SOUTH Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition HACKER-BEUCHEL, KAREN Name: Name: Address: 3860 GORDON DR Address: City-St-Zip: NAPLES, FL 34102 US City-St-Zip: Title: TRES () Delete Title: TRES (X) Change () Addition PINHOLSTER, JOHN Name: PINHOLSTER, JOHN Name: 1969 7TH STREET SOUTH Address: 640-17TH AVE SO Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 () Delete Title: Title: () Change () Addition Name: HEITMANN, TERESA Name: 2350 FORREST LANE Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: Title: 2VP () Delete () Change () Addition LINDABURY, KATHY Name: Name: 2125 MARINA DR Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN PINHOLSTER TRES 04/29/2008