2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 714673

1. Entity Name
DIANA SHORES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 540042 MERRITT ISLAND, FL 32954-0042 US	P.O. BOX 540042 MERRITT ISLAND, FL 32954-7042

01162005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-3359058
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BANKS, LILLIAN
360 ORIAN COURT
MERRITT ISLAND, FL 32953

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: LILLIAN F BANKS Lillian E Banks 3-20-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BANKS, LILLIAN
STREET ADDRESS	360 ORIAN COURT
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	V
NAME	FARLEY, JOHN C
STREET ADDRESS	1390 TAURUS COURT
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	S
NAME	RANDOLPH, JOYCE S
STREET ADDRESS	370 DIANA BLVD
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	T
NAME	SEIFFER, RUDY
STREET ADDRESS	380 DIANA BLVD
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	D
NAME	NEESE, EDITH
STREET ADDRESS	1355 TAURUS COURT
CITY-ST-ZIP	MERRITT ISLAND, FL 32953
TITLE	D
NAME	ERICKSON, LIZ
STREET ADDRESS	260 DIANA BLVD
CITY-ST-ZIP	MERRITT ISLAND, FL 32953

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03/24/05-80001-017 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rudolf Seiffer RUDOLF SEIFFER 3-20-05 321-452-8376
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #