

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714673

FILED
Feb 17, 2009
Secretary of State

Entity Name: DIANA SHORES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 540042
MERRITT ISLAND, FL 329540042 US

New Principal Place of Business:

345 URSA AVE
MERRITT ISLAND, FL 32953 US

Current Mailing Address:

P.O. BOX 540042
MERRITT ISLAND, FL 329547042

New Mailing Address:

FEI Number: 59-3359058 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MIGA, KAREN
345 URSA AVE
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: MIGA, KAREN
Address: 345 URSA AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: V () Delete
Name: MCGHEE, ROGER
Address: 325 DIANE BLVD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T () Delete
Name: NORTON, DAVID
Address: 350 DIANA BLVD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: SHEFFER, RUDY
Address: 380 DIANA BLVD
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: ERICKSON, LIZ
Address: 260 DIANA BLVD
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: RYAN, TERESA
Address: 1550 MARS ST
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: TERESA RYAN

T

02/17/2009

Electronic Signature of Signing Officer or Director

Date