

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730706

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** NORTH RIVER SHORES PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

801 JOHNSON AVENUE  
3154  
STUART, FL 34995

**New Principal Place of Business:**

**Current Mailing Address:**

1958 SE PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 59-2140953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORNETT, JANE L  
% CORNETT, GOOGE & ASSOCIATES, PA  
401 EAST OSCEOLA STREET  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

CORNETT, JANE L  
CORNETT, GOOGE & ASSOCIATES, PA  
401 EAST OSCEOLA STREET  
STUART, FL 34994 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: JANE L CORNETT

04/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LUSTY, TOM  
Address: 1759 RIVER TRL  
City-St-Zip: STUART, FL 34994

Title: VPD  
Name: HALLIBURTON, HAROLD H  
Address: 1689 RIVER TRL  
City-St-Zip: STUART, FL 34994

Title: TD  
Name: EDWARDS, MIKE  
Address: 1976 NW FORK RD  
City-St-Zip: STUART, FL 34994

Title: SD  
Name: STLOORZA, JANICE  
Address: 1395 NW PINE LAKE DR  
City-St-Zip: STUART, FL 34994

Title: D  
Name: DUCKWORTH, JEFFREY  
Address: 1215 NW PINE LAKE DR  
City-St-Zip: STUART, FL 34994

Title: D  
Name: BRESSMAN, MARY R  
Address: 1663 NW SPRUCE RIDGE DR  
City-St-Zip: STUART, FL 34994

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: TOM LUSTY

PD

04/14/2011

Electronic Signature of Signing Officer or Director

Date