## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#731506** 

FILED Jan 08, 2009 Secretary of State

Entity Name: HICKORY SHORES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

% BENSON'S INC. 12650 WHITEHALL DR. FT. MYERS, FL 33907

**New Mailing Address: Current Mailing Address:** 

% BENSON'S INC 12650 WHITEHALL DR. FT. MYERS, FL 33907

FEI Number: 59-6617286 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:

VANDALL, BONITA D 12650 WHITEHALL DR US FORT MYERS, FL 33907

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

MCFARLANE, DAVIA HACH, IRVIN Name: Name: 26236 HICKORY BLVD #9 Address: 26236 HICKORY BLVD #18 Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: Title: (X) Change ( ) Addition ( ) Delete

SMANDRA, AUDREY Name: MURLICK, WILLIAM Name: Address: 3833 WOODLAKE DR SW Address: 26236 HICKORY BLVD #17 City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete Title: () Change () Addition

SCANDALE, LOUIS Name: Name: 26236 HICKORY BLVD #23 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip:

( ) Delete Title: Title: () Change () Addition

SUNDBERG, GAIL Name: Name: 26236 HICKORY BLVD #10 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

LEWIS, KATHERINE LEWIS, KATHERINE Name: Name: PO BOX 486 26236 HICKORY BLVD #4 Address: Address: EAST ORLEANS, MA 02643 BONITA SPRINGS, FL 34134 City-St-Zip: 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: LOUIS SCANDALE **PRES** 01/08/2009