


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90404 007 ****61.25

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| DOCUMENT # 732274 |  |
| 1. Entity Name WILTON SHORES EAST CONDOMINIUM ASSOCIATION, INC. | |

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| Principal Place of Business 1150-52 N.W. 30TH COURT WILTON MANORS, FL 33311 US | Mailing Address 1280 SW 36 AVE # 301 POMPANO BEACH, FL 33069 US |
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| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip | Country |



04212008 Chg-NP CR2E037 (12/06)

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| 6. Name and Address of Current Registered Agent SHENDELL, TAMAR D ESQ. 3650 N. FEDERAL HWY., STE. 202 LIGHTHOUSE POINT, FL 33064 | |
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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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
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| Filing Fee is \$61.25 Due by May 1, 2008 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | Make check payable to Florida Department of State |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD JUAREZ, MARK P 1132 NW 30 CT 313 WILTON MANORS, FL 33311 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPD Arsenault, Mark 1150 NW 30 Ct. #104 Wilton Manors, FL 33311 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPD CAVANAUGH, PATRICK E 1150 NW 30 COURT #305 WILTON MANORS, FL 33311 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD Frederick Martin 1150 NW 30th Ct. #303 Wilton Manors, FL 33311 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D RODRIGUEZ, SANTIAGO 1152 NW 30TH COURT #112 WILTON MANORS, FL 33311 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD Bombarb, Shawn 1150 NW 30th Court #203 Wilton Manors, FL 33311 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD ARSENULT, MARK 1150 NW 30 CT #104 WILTON MANORS, FL 33311 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD Juarez, Mark 1152 NW 30th Ct. #313 Wilton Manors, FL 33311 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D KEHLENBEC, SCOTT 1152 NW 30TH CT 113 WILTON MANORS, FL 33311 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | KehlenBec, Scott 1152 NW 30TH CT 113 WILTON MANORS FL 33311 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BOMBARD, SHAWN 1150 NW 30TH COURT 203 WILTON MANORS, FL 33311 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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| SIGNATURE: <u>Mark P. Juarez</u> | <u>4/22/08</u> |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date Daytime Phone #</small> |