

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741973

FILED
Feb 13, 2009
Secretary of State

Entity Name: VILLAGE SHORES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

JOHN L ASHBY JR
914 HOLOMA DR
VERO BEACH, FL 32963 US

Current Mailing Address:

JOHN L ASHBY JR
914 HOLOMA DR
VERO BEACH, FL 32963 US

New Principal Place of Business:

JOYCE E. GORMAN
907 HOLOMA DR
VERO BEACH, FL 32963 US

New Mailing Address:

JOYCE E. GORMAN
907 HOLOMA DR
VERO BEACH, FL 32963 US

FEI Number: 22-2378831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, WILLIAM J ESQ.
3355 OCEAN DRIVE
VERO BEACH, FL 32960 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: D () Delete
Name: ARROYAVE, MARIA
Address: 914 SURFLANE
City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete
Name: ASHBY, JOHN
Address: 914 HOLOMA DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete
Name: SHANKS, KEN
Address: 917 HOLOMA DR
City-St-Zip: VERO BEACH, FL 32963

Title: STD () Delete
Name: HAYNES, PAT
Address: 905 HOLOMA DR
City-St-Zip: VERO BEACH, FL 32963

Title: PD () Delete
Name: GRAUL, TOM
Address: 910 HOLOMA DR
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: HAYNES, PATRICIA
Address: 905 HOLOMA DRIVE
City-St-Zip: VERO BEACH, FL 32963

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

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

Title: D/ST (X) Change () Addition
Name: GORMAN, JOYCE
Address: 907 HOLOMA DR
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Change () Addition
Name: GRAUL, TOM
Address: 910 HOLOMA DR
City-St-Zip: VERO BEACH, FL 32963

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: JOYCE E. GORMAN

D/ST

02/13/2009

Electronic Signature of Signing Officer or Director

Date