

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743093

FILED
Apr 25, 2009
Secretary of State

Entity Name: SHOREHOM BY THE SEA, INC.

Current Principal Place of Business:

5301 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 321694505 US

New Principal Place of Business:

Current Mailing Address:

5301 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 321694505 US

New Mailing Address:

FEI Number: 59-1949218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DERANGO, DAN R
86 EASTWIND LANE
MAITLAND, FL 32751 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: DERANGO, DAN R
Address: 1601 E AMELIA ST.
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: STORY, JIM E
Address: 125 LAMORAK LANE
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: SALINE, ALAN
Address: 345 W HORNBEAM DR
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: PENSACK, IRWIN
Address: 1676 CHERRY RIDGE DR.
City-St-Zip: LAKE MARY, FL 32746

Title: VP () Delete
Name: LINDSAY, WARREN W
Address: 871 DIXIE PKWY
City-St-Zip: WINTER PARK, FL 327891474

Title: S () Delete
Name: MANSBACH, BOB E
Address: 840 VIA LOMBARDY
City-St-Zip: WINTER PARK, FL 327891529

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: KENNETHRBRENNER

AGEN

04/25/2009

Electronic Signature of Signing Officer or Director

Date