

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748011

FILED
Mar 21, 2009
Secretary of State

Entity Name: SHORE CREST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1200 N. SHORE DRIVE NE
ST PETERSBURG, FL 337011446

New Principal Place of Business:

Current Mailing Address:

1200 NORTH SHORE DR NE
OFFICE
SAINT PETERSBURG, FL 337011446 US

New Mailing Address:

FEI Number: 59-1994726 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
311 PARK PLACE BLVD STE 250
CLEARWATER, FL 337593977 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: TD () Delete
Name: RAU, BELBERT
Address: 1200 N SHORE DR NE 107
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VD () Delete
Name: BELLINO, EILEEN
Address: 1200 N SHORE DR NE #410
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: SD () Delete
Name: DORE, LUTHER
Address: 1200 N SHORE DR NE #206
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: PD () Delete
Name: RINKEN, JOAN
Address: 1200 N SHORE DR NE
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: D (X) Delete
Name: RIONTIO, GABRIEL
Address: 1200 N SHORE DR NE 301
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: RAU, DELBERT
Address: 1200 N SHORE DR NE 107
City-St-Zip: SAINT PETERSBURG, FL 33701

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

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

Title: PD (X) Change () Addition
Name: RINKEN, JOAN
Address: 1200 N SHORE DR NE #412
City-St-Zip: SAINT PETERSBURG, FL 33701

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: JOAN RINKEN

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date