


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90112 007 ****61.25

DOCUMENT # 750014 1. Entity Name SHIRE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2500 HAVERHILL RD., N.E. PALM BAY, FL 32905 US			Mailing Address 2507 CHATHAM WAY PALM BAY, FL 32905 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FEEHLY, L WAYNE 2507 CHATHAM WAY NE PALM BAY, FL 32905			Name Lowell Fitch Street Address (P.O. Box Number is Not Acceptable) 2515 HAVER HILL RD NE PALM BAY FL 32905		
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.					
SIGNATURE <i>Lowell Fitch</i> Lowell Fitch <small>Signature, typed or printed name of registered agent and title if applicable.</small>			3/17/06 <small>DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2006		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FEEHLY, WAYNE L		NAME	Lowell Fitch	
STREET ADDRESS	2507 CHATHAM WAY NE		STREET ADDRESS	2515 HAVER HILL RD NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAPRILLA, PEG		NAME	LINDA TUBERGEN	
STREET ADDRESS	2539 CHATHAM WAY NE		STREET ADDRESS	2532 HAVER HILL RD NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	CD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PFAFF, JOE		NAME	HARMON BENSCHOTER	
STREET ADDRESS	2525 AMBERLY RD NE		STREET ADDRESS	2516 HAVER HILL RD NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY FL 32905	
TITLE	CD	<input checked="" type="checkbox"/> Delete	TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PFAFF, JOE		NAME	JOE PFAFF	
STREET ADDRESS	2525 AMBERLY RD NE		STREET ADDRESS	2525 AMBERLY RD NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FEEHLY, BETTY		NAME	PEG CAPRILLA	
STREET ADDRESS	2507 CHATHAM WAY NE		STREET ADDRESS	2539 CHATHAM WAY NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, CLETUS		NAME	WAYNE L FEEHLY	
STREET ADDRESS	2060 BEDFORD DRIVE NE		STREET ADDRESS	2507 CHATHAM WAY NE	
CITY-ST-ZIP	PALM BAY, FL 32905		CITY-ST-ZIP	PALM BAY, FL 32905	
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.					
SIGNATURE: <i>Lowell Fitch</i> Lowell Fitch <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			3/17/06 <small>Date</small>		
			<small>Daytime Phone #</small>		