

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750289

**FILED**  
**Feb 05, 2012**  
**Secretary of State**

**Entity Name:** SHELL COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2310 GULF DRIVE NORTH  
BRADENTON BEACH, FL 34217 US

**New Principal Place of Business:**

**Current Mailing Address:**

5500 MARINA DR  
#1  
HOLMES BEACH, FL 34217 US

**New Mailing Address:**

**FEI Number:** 65-0231224      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KEURST, BERNARD T  
1400 LAKE POLO DR  
ODESSA, FL 33556 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:** DT  
**Name:** BELDE, ROBERT  
**Address:** P.O. BOX 68  
**City-St-Zip:** BRADENTON BEACH, FL 34217

**Title:** DS  
**Name:** CABANAS, RON  
**Address:** 1330 N ELEANORE AVE  
**City-St-Zip:** BARTOW, FL 33830

**Title:** DP  
**Name:** DIAZ, TOMAS  
**Address:** 704 W SYLVAN DR  
**City-St-Zip:** BRANDON, FL 33510

**Title:** DVP  
**Name:** FIANDACA, JOE  
**Address:** 15 S SHORE LN  
**City-St-Zip:** ZURICH, IL 60047

**Title:** D  
**Name:** KING, SANDY  
**Address:** 116 53RD AVE W  
**City-St-Zip:** BRADENTON, FL 34207

I hereby 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 all other like empowered.

SIGNATURE: TOM DIAZ

PRES

02/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date