

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754023

FILED
Apr 26, 2007
Secretary of State

Entity Name: TOWN HOMES OF PARADISE BEACH NORTH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

330 FIFTH AVENUE
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

330 FIFTH AVENUE
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-2042270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS P FLAVIN & ASSOCIATES, P.A.
330 FIFTH AVE.
INDIALANTIC, FL 32903 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: PD () Delete
Name: FIORE, PEGGY
Address: 290 PARADISE BLVD #28
City-St-Zip: INDIALANTIC, FL 32903

Title: VP () Delete
Name: SLAUGHENHAUPT, SHIRLEY
Address: 290 PARADISE BLVD, #57
City-St-Zip: INDIALANTIC, FL 32903

Title: S () Delete
Name: SWIDERSKI, CAROLINE
Address: 290 PARADISE BLVD., #23
City-St-Zip: INDIALANTIC, FL 32903

Title: T () Delete
Name: SCARAMOUCHE, ANTHONY
Address: 290 PARADISE BLVD. - #26
City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: FIORE, PEGGY
Address: 290 PARADISE BLVD #28
City-St-Zip: INDIALANTIC, FL 32903 US

Title: P (X) Change () Addition
Name: EVANS, STUART
Address: 290 PARADISE BLVD. # 20
City-St-Zip: INDIALANTIC, FL 32903 US

Title: VP (X) Change () Addition
Name: STUCLIFFE, ALAN
Address: 465 DESOTO PARKWAY
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: TRES (X) Change () Addition
Name: BATES, ROSLYN
Address: 290 PARADISE BEACH BLVD. # 78
City-St-Zip: INDIALANTIC, FL 32903 US

Title: TRU () Change (X) Addition
Name: PARKER, MARY
Address: 290 PARADISE BEACH BLVD. # 17
City-St-Zip: INDIALANTIC, FL 32903 US

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: STUART EVANS

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date