

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755304

FILED  
Mar 26, 2010  
Secretary of State

**Entity Name:** SHAMRON BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC  
6179 WINKLER ROAD, SUITE 200  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC  
6179 WINKLER ROAD, SUITE 200  
FORT MYERS, FL 33919 US

**New Mailing Address:**

**FEI Number:** 59-2264820

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLIANT PROPERTY MANAGEMENT, LLC  
6719 WINKLER ROAD  
SUITE 200  
FORT MYERS, FL 33919 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  
Name: DISHNOW, KATHY  
Address: 7650 ESTERO BLVD. #503  
City-St-Zip: FT. MYERS BEACH, FL 33931 US

Title: VP  
Name: QUINLAN, TIMOTHY  
Address: 3788 COFFEAT DRIVE  
City-St-Zip: BELLBROOK, OH 45305 US

Title: TD  
Name: LEMIEUX, REALE  
Address: 7650 ESTERO BLVD. #308  
City-St-Zip: FT. MYERS BEACH, FL 33931 US

Title: SD  
Name: BULL, KATHY  
Address: 7650 ESTERO BLVD #806  
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: D  
Name: BLOM, DENNIS  
Address: 7650 ESTERO BLVD #707  
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: D  
Name: KEIBLER, BARBARA  
Address: 7650 ESTERO BLVD. #601  
City-St-Zip: FORT MYERS BEACH, FL 33931 US

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: REALE LEMIEUX

TD

03/26/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date