## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#761442**

FILED Mar 02, 2006 Secretary of State

Entity Name: SHORELINE HOMEOWNERS ASSOCIATION, INC.

Current Pr	incipal Place	of Busine	ess:	New Prin	cipal Place of	Business:		
	NGRESS AVE		-					
SUITE 1-C								
WEST PAL	M BEACH, FL	33406	US					
Current Mailing Address:				New Mail	New Mailing Address:			
	NGRESS AVE							
SUITE 1-C WEST PAL	.M BEACH, FL	33406	US					
FEI Number:	·		per Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired (	)	
Nama and	Address of 0.		.,				,	
Name and	Address of Ci	irrent Ke	gistered Agent:	Name and	a Address of r	New Registered Agent:		
DOMINICK Banyan d	, KAREN PROPERTY MG	MT SED	VICES INC		'. DONALD PA IGHWAY ONE	1		
2328 S. CC	NGRESS AVE	., SUITE	1-C	SUITE 10	3			
WEST PAL	M BEACH, FL	33406 L	JS	NORTH F	'ALM BEACH, I	FL 33408 US		
	named entity su of Florida.	ubmits thi	s statement for the	purpose of changing	its registered o	office or registered agent, or	both,	
SIGNATUR	RE: V. DONAL	D HILLEY	/			03/02/2006		
	Electronic	c Signatu	re of Registered Aç	gent		Date		
OFFICERS	Electronic S AND DIRECT	-	re of Registered Aç		NS/CHANGES	Date TO OFFICERS AND DIRECT	CTORS	
	AND DIRECT	ORS:	re of Registered Ag			TO OFFICERS AND DIREC	CTORS	
Title: Name:	PD () I BITZ, JAMES	-	re of Registered Ας	ADDITIO			CTOR	
Title: Name: Address:	PD () I BITZ, JAMES 93 LAS BRISAS	ORS:		ADDITIO		TO OFFICERS AND DIREC	CTORS	
OFFICERS Title: Name: Address: City-St-Zip:	PD () I BITZ, JAMES	ORS:		ADDITIO		TO OFFICERS AND DIREC	CTOR	
Title: Name: Address: City-St-Zip: Title:	PD () I BITZ, JAMES 93 LAS BRISAS BOYNTON BEAC	CORS: Delete CH, FL 334 Delete		ADDITION Title: Name: Address: City-St-Zip: Title:		TO OFFICERS AND DIREC	CTOR	
Title: Name: Address: City-St-Zip: Title: Name:	PD () I BITZ, JAMES 93 LAS BRISAS BOYNTON BEAC VD () I AGRAMONTE, AI	CORS: Delete CH, FL 334 Delete UDRA		ADDITION Title: Name: Address: City-St-Zip: Title: Name:		TO OFFICERS AND DIRECT	CTORS	
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD () I BITZ, JAMES 93 LAS BRISAS BOYNTON BEAC	CORS: Delete CH, FL 334 Delete UDRA	26	ADDITION Title: Name: Address: City-St-Zip: Title:		TO OFFICERS AND DIRECT	CTORS	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD () I BITZ, JAMES 93 LAS BRISAS BOYNTON BEAC VD () I AGRAMONTE, AI 50 VISTA DEL RI BOYNTON BEAC	CORS: Delete CH, FL 334 Delete UDRA IO CH, FL 334	26	ADDITIO		TO OFFICERS AND DIRECTOR OF THE CONTROL OF THE CONT	CTORS	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD () I BITZ, JAMES 93 LAS BRISAS BOYNTON BEAC VD () I AGRAMONTE, AI 50 VISTA DEL R BOYNTON BEAC	CORS: Delete CH, FL 334 Delete UDRA IO CH, FL 334 Delete	26	ADDITIO		TO OFFICERS AND DIRECT	CTOR	
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I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES BITZ PD 03/02/2006