

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761442

FILED
Mar 12, 2009
Secretary of State

Entity Name: SHORELINE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BANYAN PROPERTY MANAGEMENT , INC
2328 S CONGRESS AVE SUITE 1-C
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

C/O BANYAN PROPERTY MANAGEMENT, INC
2328 S CONGRESS AVE SUITE 1-C
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 59-2174483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY, DONALD V PA
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 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: D () Delete
Name: CANESTRALE, DAVID
Address: 82 VISTA DEL RIO
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: R, STEAD
Address: 45 VISTA DEL RIO
City-St-Zip: BOYNTON BEACH, FL 33426

Title: SD () Delete
Name: MEYER, KATHLEEN
Address: 39 VISTA DEL RIO
City-St-Zip: BOYNTON BEACH, FL 33426

Title: TD () Delete
Name: COOK, EDWIN
Address: 57 VISTA DEL RIO
City-St-Zip: BOYNTON BEACH, FL 33426

Title: P () Delete
Name: BITZ, JAMES
Address: 93 LAS BRISAS
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: DEMARZO, ROBERT
Address: 81 VISTA DEL RIO
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES RITZ

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date