

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762967

FILED
Apr 07, 2009
Secretary of State

Entity Name: SHORELINE GARDEN TOWNHOMES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

930 GULF SHORE DR
UNIT 13
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

930 GULF SHORE DR
UNIT 13
DESTIN, FL 32541 US

New Mailing Address:

FEI Number: 59-2427747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, CHARLES
930 GULF SHORE DR
UNIT 8
DESTIN, FL 32541 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: P () Delete
Name: ALLEN, CHARLES
Address: 930 GULF SHORE DR UNIT 8
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: HEITMEYER, SANDRA
Address: 930 GULF SHORE DR UNIT 20
City-St-Zip: DESTIN, FL 32541

Title: ST () Delete
Name: NICOLAS, VICTOR
Address: 930 GULF SHORE DR UNIT 17
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: AMBRUSO, DAN
Address: 930 GULF SHORE DR UNIT 10
City-St-Zip: DESTIN, FL 32541

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: GREEN, RON
Address: 930 GULF SHORE DR UNIT 31
City-St-Zip: DESTIN, FL 32541

Title: S (X) Change () Addition
Name: AMBRUSO, DAN
Address: 930 GULF SHORE DR UNIT 10
City-St-Zip: DESTIN, FL 32541

Title: T (X) Change () Addition
Name: NICOLAS, VICTOR
Address: 930 GULF SHORE DR UNIT 17
City-St-Zip: DESTIN, FL 32541

Title: D () Change (X) Addition
Name: TALLENT, CHRIS
Address: 930 GULF SHORE DR UNIT 2
City-St-Zip: DESTIN, FL 32541

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: VICTOR NICOLAS

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04/07/2009

Electronic Signature of Signing Officer or Director

Date