

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90032 048 ****61.25

DOCUMENT # 763264 1. Entity Name THE SHORES CLUB MANAGEMENT CORPORATION, INC.					
Principal Place of Business 3815 S ATLANTIC AVE DAYTONA BEACH SHORES FL 32118				Mailing Address 3815 S ATLANTIC AVE DAYTONA BEACH SHORES FL 32118	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number Applied For Not Applicable 59-2201275				1st MOORE CR2E037 (10/07)	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent CLARK, TOM 89 WISTERA DR LONGWOOD FL 32779				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Larry W. Page</i> <i>Tom Clark #</i> <i>3-18-08</i> Signature of registered agent and this if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		Make Check Payable to: Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CLARK, TOM 89 WISTERA DR LONGWOOD FL 32779 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD GOSLIN, TOM 2949 BUTLER BAY DR NORTH WINDERMERE FL 34786 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD SAXON, DONNIE 3815 SOUTH ATLANTIC AVENUE DAYTONA BEACH FL 32118 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SP D CASSIDY, JACK 8136 SOUTH BOULDER CT LONG GROVE FL 60047 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D POCHOJKA, KENNETH 3840 EDGEWOOD ROAD OSHKOSH WI 54904 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SP RICHARD MERLINO 2529 CROSS COUNTRY DRIVE PORT ORANGE FL 32128 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Larry W. Page* *3-18-08* *326-788-4920*