

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002165

FILED
Apr 27, 2006
Secretary of State

Entity Name: SOUTH SHORES NEIGHBORHOOD WATCH ASSOCIATION, INC.

Current Principal Place of Business:

725 OLD HICKORY RD
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

725 OLD HICKORY RD
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3694991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALANKY, JEANNINE
725 OLD HICKORY RD
JACKSONVILLE, FL 32207 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 () Delete
Name: ULRICH, GARY
Address: 919 OLD HICKORY
City-St-Zip: JACKSONVILLE, FL 32207

Title: VPD () Delete
Name: WITTEW, JANE
Address: 2116 HUNTSFORD ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD () Delete
Name: BALANKY, JEANNINE
Address: 725 OLD HICKORY
City-St-Zip: JACKSONVILLE, FL 32207

Title: T () Delete
Name: BALANKY, JEANNINE
Address: 725 OLD HICKORY
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: DUNAHOE, SUSAN
Address: 746 OLD HICKORY
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: TYRE, LETTY WOOD
Address: 1025 SOUTH SHORES
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREDERICK, DAVE
Address: 854 SOUTH SHORES ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: VPD (X) Change () Addition
Name: ANDREU, KATHY
Address: 701 OLD HICKORY ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD (X) Change () Addition
Name: UDALL, JIHAN
Address: 837 SOUTH SHORES ROAD
City-St-Zip: JACKSONVILLE, FL 32207

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 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: JEANNINE BALANKY

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04/27/2006

Electronic Signature of Signing Officer or Director

Date