

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00012

FILED
Mar 04, 2009
Secretary of State

Entity Name: THE SHORES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

835 20TH PLACE
VERO BEACH, FL 32960

New Principal Place of Business:

501 OLD WINTER BEACH ROAD
INDIAN RIVER SHORES, FL 32963

Current Mailing Address:

835 20TH PLACE
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 59-2344673 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W
3055 CARDINAL DRIVE, SUITE 302
VERO BEACH, FL 32963 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: MORGAN, DAVE
Address: 310 SHORES DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: T () Delete
Name: TURNER, TOM
Address: 131 SHORES DR.
City-St-Zip: VERO BEACH, FL 32963

Title: VP () Delete
Name: MCCONNELL, BETSY
Address: 541 SHORES DR.
City-St-Zip: VERO BEACH, FL 32963

Title: SEC () Delete
Name: IGLEHART, SALLY
Address: 381 SHORES DR.
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Delete
Name: SKILLMAN, DAVID
Address: 411 SHORES DR.
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORGAN, DAVE
Address: 310 SHORES DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: TD (X) Change () Addition
Name: TURNER, TOM
Address: 190 ISLAND SANTUARY
City-St-Zip: VERO BEACH, FL 32963

Title: VP (X) Change () Addition
Name: ZIMMERMAN, SAMUEL
Address: 361 SHORES DR.
City-St-Zip: VERO BEACH, FL 32963

Title: SD (X) Change () Addition
Name: ETHER, SUSAN
Address: 200 SHORES DRIVE
City-St-Zip: VERO BEACH, FL 32963

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: DAVID MORGAN

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date