

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00485

FILED
Jan 19, 2009
Secretary of State

Entity Name: NORTHSHIRE DEVELOPMENT PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PICKWICK RD
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

PO BOX 13653
TALLAHASSEE, FL 323173653

New Mailing Address:

FEI Number: 59-2650461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRIN, TOM
6120 PICKWICK RD
TALLAHASSEE, FL 32309 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: SHAPIRO, PAUL
Address: 6072 PICKWICK RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP () Delete
Name: JORDAN, KEITH
Address: 6036 PICKWICK RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: PERRIN, THOMAS
Address: 6120 PICKWICK RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: CREW, JEFF
Address: 8107 TENNYSON DR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: JORDAN, KEITH
Address: 6036 PICKWICK RD
City-St-Zip: TALLAHASSEE, FL 32309

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

Title: D (X) Change () Addition
Name: DOUGHTY, JOE
Address: 6082 WESSEX CT.
City-St-Zip: TALLAHASSEE, FL 32309

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: THOMAS PERRIN

MR.

01/19/2009

Electronic Signature of Signing Officer or Director

Date