

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003215

FILED
Mar 23, 2009
Secretary of State

Entity Name: SHAKETT CREEK POINTE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

816 SHAKETT CREEK DR.
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

816 SHAKETT CREEK DR
NOKOMIS, FL 34275

New Mailing Address:

816 SHAKETT CREEK DR.
NOKOMIS, FL 34275

FEI Number: 27-0005562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PURDY, TERRY
SHAKETT CREEK DR.
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

PURDY, TERRY
816 SHAKETT CREEK DR.
NOKOMIS, FL 34275 US

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: _____

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PURDY, TERRY
Address: 816 SHAKETT CREEK DR
City-St-Zip: NOKOMIS, FL 34275

Title: DS () Delete
Name: NICKOLS, GARY
Address: 886 EAST SEMINOLE DRIVE
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: HOSTETLER, PAUL E
Address: 415 BAYVIEW PARKWAY
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: NICKOLS, GARY
Address: 1271 MUSTANG STREET
City-St-Zip: NOKOMIS, FL 34275

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: TERRY PURDY

DPT

03/23/2009

Electronic Signature of Signing Officer or Director

Date