

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010689

FILED
Feb 20, 2011
Secretary of State

Entity Name: MANGROVES AT INLET SHORES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

106 MANGROVE ESTATES CIR.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

106 MANGROVE ESTATES CIR.
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

PO BOX 638
NEW SMYRNA BEACH, FL 32170

FEI Number: 20-0894431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYVERSON, CHERI C
106 MANGROVE ESTATES CIR
NEW SMYRNA BEACH, FL 32168 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: DS
Name: LIGOTINO, BEVERLY
Address: 124 MANGROVE ESTATES CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: WILLIAMS, JIM
Address: 111 MANGROVE ESTATES CIR
City-St-Zip: NEW SMYRNA BCH, FL 32160 US

Title: D VP
Name: VALLEY, TOM
Address: 134 MANGROVES ESTATES DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: D T
Name: SYVERSON, CHERI
Address: 106 MANGROVE ESTATES CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DP
Name: VACCARO, VIC
Address: 136 MANGROVE ESTATES CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: GRAINGER, ANNA
Address: 116 MANGROVE ESTATES CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby 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 all other like empowered.

SIGNATURE: CHERI SYVERSON

DT

02/20/2011

Electronic Signature of Signing Officer or Director

Date