2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

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Entity Name: THE SHORES AT GULF HARBOUR IV CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14270 ROYAL HARBOUR COURT
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

C/O SUITOR & ASSOC
15751 SAN CARLOS BLVD #8
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 20-2691750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUITOR & ASSOCIATES, INC.
15751 SAN CARLOS BLVD #8
FORT MYERS, FL 33908 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: SOLOMON, A. JACK
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

Title: VD ( ) Delete
Name: SOLOMON, ANTHONY
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

Title: STD ( ) Delete
Name: SOLOMON, ANTHONY
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

Title: D ( ) Delete
Name: MARTINSEN, MARTY
Address: 14270 ROYAL HARBOUR COURT #322
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SOLOMON, A. JACK
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change ( ) Addition
Name: SOLOMON, ANTHONY
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

Title: S/T (X) Change ( ) Addition
Name: SOLOMON, ANTHONY
Address: 3185 HORSESHOE DR. SOUTH
City-St-Zip: NAPLES, FL 34104

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: C. R. MIDDLETON MGR 04/15/2009

Electronic Signature of Signing Officer or Director — Date