

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006906

FILED
Jul 05, 2006
Secretary of State

Entity Name: SHIP'S LANTERN RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1460 S MCCALL RD SUITE 4-F
ENGLEWOOD, FL 34223

New Principal Place of Business:

2401 MORRIS AVENUE, 2ND FLOOR EAST
UNION, NJ 07083

Current Mailing Address:

1460 S MCCALL RD SUITE 4-F
ENGLEWOOD, FL 34223

New Mailing Address:

2401 MORRIS AVE. 2ND FLOOR EAST
UNION, NJ 07083

FEI Number: 90-0002781 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HANEWINEKEL, DEAN ESQ
2650 S MCCALL RD
ENGLEWOOD, FL 34224 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: DP () Delete
Name: CACCAVELLA, DOMINICK
Address: 9 ORCHID STREET
City-St-Zip: EDISON, NJ 08820

Title: DV () Delete
Name: LOCHIATTO, VITO
Address: 9 ORCHID COURT
City-St-Zip: EDISON, NJ 08820

Title: DST () Delete
Name: CASTELLANOS, LOUIS
Address: 9 ORCHID COURT
City-St-Zip: EDISON, NJ 08820

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIS CASTELLANOS

DST

07/05/2006

Electronic Signature of Signing Officer or Director

Date