

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008953

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** SHAY-LIN TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 HIGHWAY 20 EAST  
SUITE 312  
NICEVILLE, FL 32578 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5263  
NICEVILLE, FL 32578 US

**New Mailing Address:**

4400 HIGHWAY 20 EAST  
SUITE 312  
NICEVILLE, FL 32578 US

**FEI Number:** 20-4475929

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LANDSBERGER, DARLANE  
4400 HIGHWAY 20 EAST  
SUITE 312  
NICEVILLE, FL 32578 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  
Name: DESHAY, MICHAEL  
Address: 81 MARINA COVE DR  
City-St-Zip: NICEVILLE, FL 32578 US

Title: VD  
Name: MARTIN, SCOTT  
Address: 1852 SHAY-LIN CT  
City-St-Zip: NICEVILLE, FL 32578 US

Title: TD  
Name: COOPER, WILLIAM  
Address: 156 WRIGHT CIRCLE  
City-St-Zip: NICEVILLE, FL 32578 US

Title: SD  
Name: PINKSTON, CURTIS  
Address: 1802 SHAY-LIN COURT D-2  
City-St-Zip: NICEVILLE, FL 32578 US

Title: D  
Name: DESHAY, DEREK  
Address: P.O. BOX 73  
City-St-Zip: LAGRANGEVILLE, NY 12540 US

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:** MICHAEL DESHAY

PD

04/27/2011

Electronic Signature of Signing Officer or Director

Date