

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002245

FILED  
Feb 17, 2007  
Secretary of State

Entity Name: PENTHOUSE SHORES ASSOCIATION INC

## Current Principal Place of Business:

661 POINSETTIA AVE  
CLEARWATER, FL 33767

## New Principal Place of Business:

## Current Mailing Address:

661 POINSETTIA AVE  
CLEARWATER, FL 33767

## New Mailing Address:

P.O. BOX 2007  
DUNEDIN, FL 34697 20

FEI Number: 59-1514058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASSER, WILLIAM  
1351 BLUFFS CIRCLE  
DUNNEDIN, FL 34698 US

## Name and Address of New Registered Agent:

NASSER, WILLIAM  
1351 BLUFFS CIRCLE  
DUNNEDIN, FL 34698 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: WILLIAM J. NASSER

02/17/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCFADDEN, GREG  
Address: 661 POINSETTIA AVE  
City-St-Zip: CLEARWATER, FL 33767

Title: V ( ) Delete  
Name: MCKINNEY, CARMEN  
Address: 661 POINSETTIA AVE  
City-St-Zip: CLEARWATER, FL 33767

Title: T ( ) Delete  
Name: HAYS, BILL  
Address: 661 POINSETTIA AVE  
City-St-Zip: CLEARWATER, FL 33767

Title: S ( ) Delete  
Name: LEWINSKI, HANNA  
Address: 661 POINSETTIA AVE  
City-St-Zip: CLEARWATER, FL 33767

Title: D ( ) Delete  
Name: FOLEY, CATHY  
Address: 661 POINSETTIA AVE  
City-St-Zip: CLEARWATER, FL 33767

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: WILLIAM, HILDEBRAND  
Address: 661 POINSETTIA AVE UNIT 107  
City-St-Zip: CLEARWATER, FL 33767

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: GREG MCFADDEN

P

02/17/2007

Electronic Signature of Signing Officer or Director

Date