

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003500

FILED  
Mar 15, 2008  
Secretary of State

**Entity Name:** CHARLOTTE SHORES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2069 FIRST ST - STE 301  
FT MYERS, FL 33901

**New Principal Place of Business:**

2077 FIRST ST - STE 201  
FT MYERS, FL 33901

**Current Mailing Address:**

P O BOX 144  
BOKEELIA, FL 33922

**New Mailing Address:**

**FEI Number:** 59-1441834

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COSTELLO, JAMES M  
2069 FIRST ST - STE 301  
FT MYERS, FL 33901 US

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

COSTELLO, JAMES M  
2077 FIRST ST - STE 203  
FT MYERS, FL 33901 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: \_\_\_\_\_

03/15/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: YODER, SHARON  
Address: 2069 FIRST ST - STE 301  
City-St-Zip: FT MYERS, FL 33901

Title: VPD ( ) Delete  
Name: MCKEE, WILLIAM J  
Address: 2069 FIRST ST - STE 301  
City-St-Zip: FT MYERS, FL 33901

Title: STD ( ) Delete  
Name: ARKENAU, SUSAN  
Address: 2069 FIRST ST - STE 301  
City-St-Zip: FT MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: YODER, SHARON  
Address: 2077 FIRST ST - STE 203  
City-St-Zip: FT MYERS, FL 33901

Title: VPD (X) Change ( ) Addition  
Name: MCKEE, WILLIAM J  
Address: 2077 FIRST ST - STE 203  
City-St-Zip: FT MYERS, FL 33901

Title: STD (X) Change ( ) Addition  
Name: ARKENAU, SUSAN  
Address: 2077 FIRST ST - STE 203  
City-St-Zip: FT MYERS, FL 33901

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: SUSAN ARKENAU

STD

03/15/2008

Electronic Signature of Signing Officer or Director

Date