

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13530

FILED
Apr 24, 2008
Secretary of State

Entity Name: SHORE CLUB CONDOMINIUM ASSOCIATION OF NAPLES, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MGMT
265 AIRPORT RD. S.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

R & P PROPERTY MGMT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0055937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MGMT
265 AIRPORT RD. S.
NAPLES, FL 34104 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: VPD () Delete
Name: SHEA, MAURICE
Address: 727 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: PD () Delete
Name: GREINER, PATRICIA
Address: 725 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: T () Delete
Name: MCCULLOUGH, JOHN
Address: 737 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: MARKUS, KAREN
Address: 721 NEOPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: D (X) Delete
Name: CORBETT, KATHLEEN
Address: 705 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: RUZEVICH, ELLEN
Address: P.O. BOX 404
City-St-Zip: LIVINGSTON, IL 62058

Title: PD (X) Change () Addition
Name: FREESE, MICHAEL
Address: P.O. BOX 1038
City-St-Zip: TOLONO, IL 61880

Title: TD (X) Change () Addition
Name: BRADY, MICHAEL
Address: 201 KENSINGTON WAY
City-St-Zip: MOUNT KISCO, NY 10549

Title: SD (X) Change () Addition
Name: CORCORAN, JEANNE
Address: 64 FOURTH ST #D204
City-St-Zip: BONITA SPRINGS, FL 34134

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: MICHAEL FREESE

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date