

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13530

**FILED**  
**Apr 21, 2011**  
**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: PD  
Name: SHEA, MAURICE  
Address: 727 NEAPOLITAN WAY  
City-St-Zip: NAPLES, FL 34103

Title: VPD  
Name: CORBETT, KATHLEEN  
Address: 705 NEAPOLITAN WAY #705  
City-St-Zip: NAPLES, FL 34103

Title: TD  
Name: MCCULLOUGH, JOHN E  
Address: 737 NEAPOLITAN WAY #737  
City-St-Zip: NAPLES, FL 34103

Title: SD  
Name: MARKUS, KAREN  
Address: 48W780 CHANDELLE DRIVE  
City-St-Zip: HAMPSHIRE, IL 60140

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: MAURICE SHEA

PD

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date