2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13539

FILED Feb 02, 2009 Secretary of State

Entity Name: NORSEMAN'S HARBOUR PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3013 LOOKOUT BOULEVARD, SOUTH PORT ST. LUCIE, FL 34984

Current Mailing Address: New Mailing Address:

3013 LOOKOUT BOULEVARD, SOUTH PORT ST. LUCIE, FL 34984

FEI Number: 59-2941500 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

O'NEILL, LISA E SHADOWEN, BERT E 2981 SOUTH LOOKOUT BLVD 2983 SOUTH LOOKOUT BI

2981 SOUTH LOOKOUT BLVD
PORT SAINT LUCIE, FL 34984 US
2983 SOUTH LOOKOUT BLVD
PORT SAINT LUCIE, FL 34984 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: BERT E. SHADOWEN 02/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition Name: KEEFE, MICHAEL Name: BROWN, KAREN

 Name:
 KEEFE, MICHAEL
 Name:
 BROWN, KAREN

 Address:
 3007 S LOOKOUT BLVD
 Address:
 3005 S LOOKOUT BLVD

 City-St-Zip:
 PORT ST LUCIE, FL 34984 US
 City-St-Zip:
 PORT ST LUCIE, FL 34984 US

Title: P () Delete Title: P (X) Change () Addition Name: STAHL, CYNDY Name: KELLY, CHRISTOPHER

Address: 3009 SOUTH LOOKOUT BLVD
City-St-Zip: PORT ST LUCIE, FL 34984 US

Ralle: RELET, CHRISTOFFIER
2985 SOUTH LOOKOUT BLVD
City-St-Zip: PORT ST LUCIE, FL 34984 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 O'NEILL, LISA
 Name:
 SHADOWEN, BERT E

 Address:
 2981 SOUTH LOOKOUT BLVD
 Address:
 2983 SOUTH LOOKOUT BLVD

 City-St-Zip:
 PORT SAINT LUCIE, FL 34984 US
 City-St-Zip:
 PORT SAINT LUCIE, FL 34984 US

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MELTZER, JAY
 Name:

 Address:
 3011 SOUTH LOOKOUT BLVD
 Address:

 City-St-Zip:
 PORT SAINT LUCIE, FL 34984 US
 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: BERT E. SHADOWEN T 02/02/2009