2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N13838

Entity Name: NORTH SHORE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2025 SEMINOLE RD.
104
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

Current Mailing Address:

345 20TH STREET
ATTN: STEVEN HANNAN
ATLANTIC BEACH, FL 32233 US

New Mailing Address:

FEI Number: 59-2672319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANNAN, STEVEN R
345 20TH STREET
ATLANTIC BEACH, FL 32233 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: D ( ) Delete
Name: HALL, MARY E
Address: 2025 SEMINOLE RD - # 101
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete
Name: LEWIS, DONALD K. (RO, NALD E. MCDANI E L, POA)
Address: 1381 CRYSTAL COURT (ATTN: RON MCDANIEL)
City-St-Zip: PALM SPRINGS, CA 92264

Title: D ( ) Delete
Name: HANNAN, STEVEN R
Address: 2025 SEMINOLE RD - # 105
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete
Name: DECKER, NANCY K
Address: 2025 SEMINOLE RD - # 103
City-St-Zip: ATLANTIC BCH, FL 32233

Title: D ( ) Delete
Name: COSBY, PATRICIA
Address: 2025 SEMINOLE RD - # 104
City-St-Zip: ATLANTIC BCH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: STEVEN R. HANNAN D 03/23/2009

Electronic Signature of Signing Officer or Director — Date