

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20341

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** THE ST. AUGUSTINE SHORES RECREATIONAL AND SOCIAL ASSOCIATION, INC.

**Current Principal Place of Business:**

790 CHRISTINA DRIVE  
SAINT AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

**Current Mailing Address:**

884 ALCALA DRIVE  
SAINT AUGUSTINE, FL 32086 US

**New Mailing Address:**

**FEI Number:** 59-2365950

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIS, NANCY  
884 ALCALA DRIVE  
SAINT AUGUSTINE, FL 32086 US

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

GRIFFITH, HARRY E TREAS.  
109 HONDO DR>  
SAINT AUGUSTINE, FL 32086 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: HARRY E> GRIFFITH

03/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WILLIS, NANCY  
Address: 884 ALCALA DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: TD ( ) Delete  
Name: ALEXANDERSON, LOU  
Address: 361 ROSA CT.  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D ( ) Delete  
Name: PITMAN, PRISCILLA  
Address: 159 SHORES BLVD  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VPD ( ) Delete  
Name: SHENEMAN, JAMES  
Address: 849 RITA CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: SD ( ) Delete  
Name: RENY, BARBARA  
Address: 910 ALCALA DR  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: CSD ( ) Delete  
Name: STEELE, JOAN  
Address: 335 GRACIELA CIR  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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

Title: PD (X) Change ( ) Addition  
Name: WILLIS, NANCY PRES.  
Address: 884 ALCALA DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: TD (X) Change ( ) Addition  
Name: GRIFFITH, HARRY E TREAS.  
Address: 109 HONDO DR.  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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

Title: VPD (X) Change ( ) Addition  
Name: OLIVEIRA, RAUL  
Address: 283 CORTEZ DR.  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: HARRY E. GRIFFITH

TR

03/27/2009

Electronic Signature of Signing Officer or Director

Date