

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22390

FILED  
Jan 16, 2007  
Secretary of State

Entity Name: SHALIMAR POINTE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 1096  
SHALIMAR, FL 32579 US

**New Principal Place of Business:**

921 THE MASTERS BLVD  
SHALIMAR, FL 32579 US

**Current Mailing Address:**

P O BOX 1096  
SHALIMAR, FL 32579 US

**New Mailing Address:**

FEI Number: 59-3139893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DOUGLAS, WILLIAM  
926 THE MASTERS BLVD.  
SHALIMAR, FL 32579 US

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

SEIDL, WILLIAM  
921 THE MASTERS BLVD.  
SHALIMAR, FL 32579 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: SEIDL, WILLIAM

01/16/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TREA ( ) Delete  
Name: GERLACH, LES TREASUR  
Address: 810 CHOCTAW LANE  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR ( ) Delete  
Name: DOUGLAS, WILLIAM PRES  
Address: 956 SHALIMAR PT.  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR ( ) Delete  
Name: LOAR, MAGGIE SECT  
Address: 922 SHALIMAR POINTE DRIVE  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR ( ) Delete  
Name: BOYT, BEN  
Address: 833 CHOCTAW LANE  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR ( ) Delete  
Name: SEIDL, WILLIAM  
Address: 921 THE MASTERS BLVD.  
City-St-Zip: SHALIMAR, FL 32579

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

Title: DIR (X) Change ( ) Addition  
Name: SEIDL, WILLIAM PRES  
Address: 921 THE MASTERS BLVD  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR (X) Change ( ) Addition  
Name: BOYT, BEN VP  
Address: 833 CHOCTAW LANE  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR (X) Change ( ) Addition  
Name: LEE, SALLY SECT  
Address: 1000 SHALIMAR POINTE DRIVE  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR (X) Change ( ) Addition  
Name: MORRIS, BARBARA TREAS  
Address: 1007 SHALIMAR POINTS DR  
City-St-Zip: SHALIMAR, FL 32579

Title: DIR (X) Change ( ) Addition  
Name: PATTISON, DONNA  
Address: 852 THE MASTERS BLVD  
City-St-Zip: SHALIMAR, FL 32579

I hereby certify that the information supplied with this filing does not qualify for the 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: SEIDL, WILLIAM

PRES

01/16/2007

Electronic Signature of Signing Officer or Director

Date