2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22390

FILED Jan 07, 2010 Secretary of State

Entity Name: SHALIMAR POINTE OWNERS ASSOCIATION, INC.

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

1007 SHALIMAR POINTE DRIVE 891 SHALIMAR COURT SHALIMAR, FL 32579 US SHALIMAR, FL 32579 US

Current Mailing Address: New Mailing Address:

P O BOX 1096

SHALIMAR, FL 32579 US

FEI Number: 59-3139893 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:

MORRIS, BARBARA
1007 SHALIMAR POINTE DRIVE
SHALIMAR, FL 32579 US

MAHER, CHRISTINE
871 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: CHRISTINE MAHER 01/07/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DIR

Name: FORTNER, JIM PRES Address: 891 SHALIMAR COURT City-St-Zip: SHALIMAR, FL 32579

Title: DIR

Name: PATTERSON, DONALD VP Address: 852 THE MASTERS BLVD City-St-Zip: SHALIMAR, FL 32579

Title: DIR

Name: MAHER, CHRISTINE TREAS Address: 871 THE MASTERS BLVD City-St-Zip: SHALIMAR, FL 32579

Title: DIR

Name: WATSON, CHRISTINE SEC Address: 961 SHALIMAR POINTE DRIVE

City-St-Zip: SHALIMAR, FL 32579

Title: DIR

Name: CORBIN, ANDY AT LARG Address: 855 THE MASTERS BLVD City-St-Zip: SHALIMAR, FL 32579

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: CHRISTINE MAHER TREA 01/07/2010