

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25669

FILED
Mar 02, 2007
Secretary of State

Entity Name: SHORELINE TERRACES V ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 65-0106209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 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: DT () Delete
Name: HAGE, JOHN
Address: 395 SYCAMORE RIDGE WAY
City-St-Zip: GAHANNA, OH 43230

Title: VD () Delete
Name: HILDEGARD, GOEBEL
Address: 950 SANDPIPER CIR
City-St-Zip: BRADENTON, FL 34209

Title: SD () Delete
Name: KUKULA, JOHN
Address: 960 SANDPIPER CIRCLE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: SMITH, JUDY
Address: 946 SANDPIPER CIRCLE
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: FITZPATRICK, ERLINE
Address: 944 SANDPIPER CIR
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: HAGE, JOHN
Address: 1276 AMBERLEA DR E
City-St-Zip: GAHANNA, OH 43230

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

Title: SD (X) Change () Addition
Name: KUKULA, JOHN
Address: 960 SANDPIPER CIR
City-St-Zip: BRADENTON, FL 34209

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

Title: PD (X) Change () Addition
Name: FITZPATRICK, ERLINE
Address: 944 SANDPIPER CIR
City-St-Zip: BRADENTON, FL 34209

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: ERLINE FITZPATRICK

PD

03/02/2007

Electronic Signature of Signing Officer or Director

Date