

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 24, 2009
Secretary of State

DOCUMENT# N46702

Entity Name: WILSHIRE LAKES MASTER ASSOCIATION, INC.**Current Principal Place of Business:**C/O INTEGRATED PROPERTY MGMT, INC
3435 10TH STREET NO, #201
NAPLES, FL 34103 US**New Principal Place of Business:****Current Mailing Address:**C/O INTEGRATED PROPERTY MGMT, INC
3435 10TH STREET NO, #201
NAPLES, FL 34103 US**New Mailing Address:****FEI Number:** 65-0313751**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**INTEGRATED PROPERTY MGMT, INC
3435 10TH STREET NO, #201
NAPLES, FL 34103 US**Name and Address of New Registered Agent:**URBANCIC, GREGORY L
4001 TAMIAMI TRAIL NORTH
SUITE 300
NAPLES, FL 34103 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: GREGORY L. URBANCIC

06/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MANGAN, SHARON
Address: 9741 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34109

Title: DS () Delete
Name: RONDEAU, BEVERLY
Address: 6305 WILSHIRE PINES CIRCLE, #504
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: GARABED, JOE
Address: 9961 CLEAR LAKE CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: 1VP (X) Delete
Name: GURSTEL, MARC
Address: 6280-903 WILSHIRE PINES CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: DT () Delete
Name: GAROT, CHUCK
Address: 9747 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34109

Title: 2VP () Delete
Name: DENOVE, LISA
Address: 9645 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34109

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:

Title: VP (X) Change () Addition
Name: DENOVE, LISA
Address: 9645 WILSHIRE LAKES BLVD
City-St-Zip: NAPLES, FL 34109

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: SHARON MANGAN

DP

06/24/2009

Electronic Signature of Signing Officer or Director

Date