

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50921

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** SHALIMAR PLACE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2559 BARRON CT  
SHALIMAR, FL 32579 US

**New Principal Place of Business:**

**Current Mailing Address:**

2559 BARRON CT  
SHALIMAR, FL 32579 US

**New Mailing Address:**

**FEI Number:** 59-3168720

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, JAMES M  
2559 BARRON COURT  
SHALIMAR, FL 32579 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: PD  
Name: MOORE, JAMES M  
Address: 2559 BARRON COURT  
City-St-Zip: SHALIMAR, FL 32579

Title: SD  
Name: PITCHFORD, STANLEY  
Address: 2554 BARRON COURT  
City-St-Zip: SHALIMAR, FL 32579

Title: D  
Name: HEIGES, CHUCK  
Address: 2561 BARRON COURT  
City-St-Zip: SHALIMAR, FL 32579

Title: D  
Name: HERMAN, VICKI  
Address: 2571 BARRON COURT  
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: JAMES M. MOORE

PD

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date