

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001087

FILED
Mar 02, 2012
Secretary of State

Entity Name: SOUTH SHORE VILLAS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2786 W CROWN POINTE BLVD
NAPLES, FL 34112 US

New Principal Place of Business:

6704 LONE OAK BLVD
NAPLES, FL 34109 US

Current Mailing Address:

6704 LONE OAK BLVD
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0572520 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GUARDIAN PROPERTY MANAGEMENT
6704 LONE OAK BLVD
NAPLES, FL 34109 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: P
Name: SCHNEIDER, JOHN
Address: 3026 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: LIMING, BETTY
Address: 3190 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: T
Name: KENNEDY, ROBERT
Address: 3032 W CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: S
Name: HUBER, CHARLES
Address: 3166 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

Title: D
Name: DRISCOLL, NANCY
Address: 3008 W. CROWN POINTE BLVD
City-St-Zip: NAPLES, FL 34112

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: BYRON L ROSS

MGR

03/02/2012

Electronic Signature of Signing Officer or Director

Date