

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002287

FILED  
Apr 22, 2011  
Secretary of State

**Entity Name:** SOUTH SHORES UTILITY ASSOCIATION, INC.

**Current Principal Place of Business:**

179 OCEANWAY DR  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

**Current Mailing Address:**

645 CLASSIC CT.  
STE 104  
MELBOURNE, FL 32940 US

**New Mailing Address:**

**FEI Number:** 59-3392462      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SPACE COAST PROPERT MANAGEMENT OF BREVARD  
645 CLASSIC CT.  
STE 104  
MELBOURNE, FL 32940 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: PRES  
Name: MCELHANEY, BOB  
Address: 5368 SOLWAY  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: TREA  
Name: PUTAGGIO, BETTY  
Address: 5595 CORDGRASS LN  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: VP  
Name: SOCHACKI, WALTER  
Address: 5527 CORDGRASS LN  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: SEC  
Name: LAVANDIER, EDNA  
Address: 5635 S. HWY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: DAL  
Name: FRANK, GEORGE  
Address: 5277 SOLWAY DR  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

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: BOB MCELHANEY

PRES

04/22/2011

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

\_\_\_\_\_  
Date