

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003801

FILED
Apr 27, 2009
Secretary of State

Entity Name: VICTORIA SHORES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1016 COLLIER CENTER WAY
SUITE 102
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

1016 COLLIER CENTER WAY
SUITE 102
NAPLES, FL 34110

New Mailing Address:

FEI Number: 65-0684995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLATINUM PROPERTY MANAGEMENT, LLC
1016 COLLIER CENTER WAY
SUITE 102
NAPLES, FL 34110 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 () Delete
Name: SHELTON, LIBBY
Address: 9650 VICTORIA LANE, #302B
City-St-Zip: NAPLES, FL 34109

Title: TD () Delete
Name: SHOUP, PETER
Address: 9650 VICTORIA LANE 204B
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: ALDRICH, KELLY
Address: 9650 VICTORIA LANE B305
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: HEVER, LOURAINÉ
Address: 9640 VICTORIA LANE 101C
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: SMITH, KAREN
Address: 9640 VICTORIA LANE, 201C
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHELTON, LIBBY
Address: 9650 VICTORIA LANE, #302B
City-St-Zip: NAPLES, FL 34109

Title: T (X) Change () Addition
Name: SHOUP, GINGER
Address: 9650 VICTORIA LANE 204B
City-St-Zip: NAPLES, FL 34109

Title: S (X) Change () Addition
Name: HEUER, LOURAINÉ
Address: 9640 VICTORIA LANE #101C
City-St-Zip: NAPLES, FL 34109

Title: D (X) Change () Addition
Name: SULLIVAN, MELINDA
Address: 9660 VICTORIA LANE #107A
City-St-Zip: NAPLES, FL 34109

Title: P (X) Change () Addition
Name: MOODY, RHEA
Address: 9640 VICTORIA LANE #103C
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: JUDITH BONACCI

MGR

04/27/2009

Electronic Signature of Signing Officer or Director

Date