

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90005 011 ****70.00

DOCUMENT # N98000005831

1. Entity Name

THE EASTERN SHORES ASSOCIATION, INC.



Principal Place of Business

EASTERN SHORES
10 CAMINO REAL DR
EDGEWATER FL 32132

Mailing Address

10 CAMINO REAL DRIVE
OFFICE, ASSOC., ATTENTION
EDGEWATER FL 32132



2. Principal Place of Business - No P.O. Box # *INC.*

THE EASTERN SHORES ASSOC.

Suite, Apt. #, etc.

10 CAMINO REAL DR

City & State

EDGEWATER, FL

Zip

32132

Country

USA

3. Mailing Address

10 CAMINO REAL DR

Suite, Apt. #, etc.

City & State

EDGEWATER, FL

Zip

32132

Country

USA

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2015464

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SCHIEFELBEIN, WILLIAM T
1 RIO DEL INDIO DR
EDGEWATER FL 32132

7. Name and Address of New Registered Agent

Name *RAYMOND E DURANT*

Street Address (P.O. Box Number is Not Acceptable)

1 BORDE AQUA DR

City

EDGEWATER

FL

Zip Code

32132

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *RAYMOND E DURANT, PRES.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature is required when registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE *P*
NAME SCHIEFELBEIN, WILLIAM T
STREET ADDRESS 1 RIO DEL INDIO DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE *T*
NAME DE YOUNG, RODNEY
STREET ADDRESS 24 CAMINO REAL DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE *S*
NAME MARY, FREEBORN
STREET ADDRESS 33 CAMINO REAL DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE *D*
NAME FLYNN, RAY
STREET ADDRESS 15 BORDE AQUA DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE *D*
NAME ROTUNDA, LOUIS
STREET ADDRESS 15 LAS PALMAS DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE *V*
NAME DOSTALER, BOB
STREET ADDRESS 19 LAS PALMAS DR
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE *P*
NAME *RAYMOND E DURANT*
STREET ADDRESS *1 BORDE AQUA DR*
CITY-ST-ZIP *EDGEWATER, FL, 32132* ☒ Change ☐ Addition

TITLE *V*
NAME *THOMAS COE*
STREET ADDRESS *11 LAS PALMAS DR*
CITY-ST-ZIP *EDGEWATER, FL 32132* ☒ Change ☐ Addition

TITLE *T*
NAME *ZELLA DURANT*
STREET ADDRESS *1 BORDE AQUA DR*
CITY-ST-ZIP *EDGEWATER, FL 32132* ☒ Change ☐ Addition

TITLE *S*
NAME *SANDRA M. BAESEE*
STREET ADDRESS *12 LAS PALMAS DR*
CITY-ST-ZIP *EDGEWATER, FL 32132* ☒ Change ☐ Addition

TITLE *D*
NAME *LOUIS ROTUNDA*
STREET ADDRESS *15 LAS PALMAS DR*
CITY-ST-ZIP *EDGEWATER, FL, 32132* ☒ Change ☐ Addition

TITLE *D*
NAME *RON BLANCHETTE*
STREET ADDRESS *51 LAS PALMAS DR*
CITY-ST-ZIP *EDGEWATER, FL 32132* ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *RAYMOND E DURANT* *Raymond E Durant*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-366-424-0975

PAGE 2

THE EASTERN SHORES ASSOCIATION, INC.

10 CAMINO REAL DR

EDGEWATER, FL 32132

ATTACHMENT

40034366

#198000005831

☒ CHANGE

TITLE

D

NAME

MARIANNE BARNETT

STREET ADDRESS

8 RID. DEL INDIO DR

CITY, ST. -ZIP

EDGEWATER, FL 32132

TITLE

D

☒ CHANGE

NAME

LINDA MCNAMEE

STREET ADDRESS

10 LAS PALMAS DR

CITY-ST-ZIP

EDGEWATER, FL 32132

TITLE

D

☒ CHANGE

NAME

ANITA UNDERWOOD

STREET ADDRESS

18 CAMINO REAL CT

CITY-ST-ZIP

EDGEWATER, FL 32132