2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P94000018462

Entity Name: NORTH SHORE CONDOMINIUM DEVELOPMENT CORPORATION

Current Principal Place of Business:

3434 CLEVELAND AVENUE
FORT MYERS, FL 33901

New Principal Place of Business:

11460 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991

Current Mailing Address:

P.O. BOX 248
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 65-0472892 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLOAN, STEPHEN
431 SW 37TH ST
CAPE CORAL, FL 33914 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: POVIA, LAWRENCE
Address: 3434 CLEVELAND AVE.
City-St-Zip: FORT MYERS, FL 33901

Title: V ( ) Delete
Name: SLOAN, STEPHEN J
Address: 431 SW 37TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: ST ( ) Delete
Name: BALLANTINE, DEAN
Address: 3434 CLEVELAND AVE.
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: POVIA, LAWRENCE
Address: P.O. BOX 248
City-St-Zip: FORT MYERS, FL 33902

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: BALLANTINE, DEAN
Address: 11460 ROYAL TEE CIRCLE
City-St-Zip: CAPE CORAL, FL 33991

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEAN BALLANTINE ST 04/28/2005

Electronic Signature of Signing Officer or Director Date