## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 721380** 

Entity Name: THE SHORE CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 15, 2019 Secretary of State 6138996789CC

## **Current Principal Place of Business:**

5757 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228

## **Current Mailing Address:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT 4134 GULF OF MEXICO DRIVE, STE. 203 LONGBOAT KEY. FL 34228 US

FEI Number: 38-1991361 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

ATASSI, MICHAEL C/O LIGHTHOUSE PROPERTY MANAGEMENT 4134 GULF OF MEXICO DRIVE, STE. 203 LONGBOAT KEY, FL 34228 US

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: MICHAEL ATASSI 04/15/2019

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

Name ATASSI, MICHAEL Name ROSENFELD, MARK

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT MANAGEMENT

4134 GULF OF MEXICO DRIVE, STE. 4134 GULF OF MEXICO DRIVE, SUITE 203

City-State-Zip: LONGBOAT KEY FL 34228 City-State-Zip: LONGBOAT KEY FL 34228

**SECRETARY** Title Title DIRECTOR WILMETH, WILLIAM Name BENSON, JOHN Name

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

> MANAGEMENT MANAGEMENT

4134 GULF OF MEXICO DRIVE, STE. 4134 GULF OF MEXICO DRIVE, STE. 203 203

LONGBOAT KEY FL 34228 LONGBOAT KEY FL 34228 City-State-Zip: City-State-Zip:

VΡ Title Title **TREASURER** Name DIGIAMMARINO, ENRICO Name ROGERS, DAVID

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

> MANAGEMENT MANAGEMENT

4134 GULF OF MEXICO DRIVE, STE. 4134 GULF OF MEXICO DRIVE, STE.

LONGBOAT KEY FL 34228 LONGBOAT KEY FL 34228 City-State-Zip: City-State-Zip:

Title DIRECTOR

Name BUCKLEY, WILLIAM

Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT

4134 GULF OF MEXICO DRIVE, SUITE

203

City-State-Zip: LONGBOAT KEY FL 34228

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: MICHAEL ATASSI

**PRESIDENT** 

04/15/2019

Electronic Signature of Signing Officer/Director Detail

Date