

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07620

**Entity Name:** NORTH SHORES IMPROVEMENT ASSOCIATION

**Current Principal Place of Business:**

120 MEADOW AVENUE  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

P.O BOX 3411  
SAINT AUGUSTINE, FL 32085 US

**FEI Number:** 59-3593071

**Certificate of Status Desired:** Yes

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

BOSTON, DAWN  
145 LAWN AVE  
SAINT AUGUSTINE, FL 32084 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:** DAWN BOSTON

01/29/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name GILLES , KELLY  
Address 206 THIRD STREET  
City-State-Zip: ST AUGUSTINE FL 32084

Title PRESIDENT  
Name RUSSELL, TRACY  
Address 141 OCEAN HOLLOW LANE  
City-State-Zip: ST AUGUSTINE FL 32084

Title VP  
Name GILLES, BILL  
Address 206 THIRD STREET  
City-State-Zip: ST. AUGUSTINE FL 32084

Title TREASURER  
Name BOSTON, DAWN  
Address 145 LAWN AVENUE  
City-State-Zip: SAINT AUGUSTINE FL 32085

*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:** DAWN BOSTON

NSIA TREASURER

01/29/2023

Electronic Signature of Signing Officer/Director Detail

Date