

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46539

**FILED**  
**Jan 24, 2015**  
**Secretary of State**  
**CC6914967279**

**Entity Name:** NORTH SHORE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550

**Current Mailing Address:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**FEI Number: 59-3103106**

**Certificate of Status Desired: No**

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

WILLIAM S. HOWELL, JR, J.D., P.A.  
1727 S COUNTY HWY 393  
SANTA ROSA BEACH, FL 32459 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, VP  
Name           PUGH, ROBERT  
Address        9535 EDNAM COVE  
City-State-Zip: MEMPHIS TN 38139-6821

Title           DIRECTOR, PRESIDENT  
Name           MANION, JOSEPH  
Address        963 NORTSHORE DRIVE  
City-State-Zip: MIRAMAR BEACH FL 32550

Title           DIRECTOR, TREASURER  
Name           TONEY, DAVID  
Address        13700 W OHIO AVENUE  
City-State-Zip: LAKEWOOD CO 80228-3056

Title           DIRECTOR, SECRETARY  
Name           MANION, CHRIS  
Address        963 NORTSHORE DRIVE  
City-State-Zip: MIRAMAR BEACH FL 32550

Title           DIRECTOR  
Name           GIBSON, MICHAEL  
Address        14 LARGO WOODS PLACE  
City-State-Zip: THE WOODLANDS TX 77382

Title           DIRECTOR  
Name           LANDWEHR, LOUIS  
Address        300 CONSTITUTION DRIVE  
City-State-Zip: JEFFERSON CITY MO 65109

Title           DIRECTOR  
Name           ROUSE, COLLEEN  
Address        1145 WHITEHAWK TRAIL  
City-State-Zip: LAWRENCEVILLE GA 30043

*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: JOSEPH MANION**

**PRESIDENT**

**01/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date