

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 30, 2009  
Secretary of State**

DOCUMENT# 733738

Entity Name: SHADOW BROOK PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5865 34TH LANE  
VERO BEACH, FL 32966

**New Principal Place of Business:**

**Current Mailing Address:**

5865 34TH LANE  
VERO BEACH, FL 32966

**New Mailing Address:**

FEI Number: 59-1650683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

YOUNG, JULIANA  
5865 34TH LANE  
VERO BEACH, FL 32966      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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCORMICK, FRANK  
Address: 5845 34TH LANE  
City-St-Zip: VERO BEACH, FL 32966

Title: STD ( ) Delete  
Name: THOREN, BARBARA  
Address: 3425 SHADOW BROOK LANE  
City-St-Zip: VERO BEACH, FL 32966

Title: T ( ) Delete  
Name: YOUNG, JULIANA  
Address: 5865 34TH LANE  
City-St-Zip: VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SEC (X) Change ( ) Addition  
Name: DELP, D'ANN  
Address: 5860 34TH STREET  
City-St-Zip: VERO BEACH, FL 32966

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIANA YOUNG

T

03/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date