


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90007 041 ****61.25

DOCUMENT # 736472
 1. Entity Name
 SHADOWOOD COMMUNITY ASSOCIATION, INC.



Principal Place of Business
 1931 SHADOWOOD PARK DR
 JACKSONVILLE, FL 32225-2401 US

Mailing Address
 1931 SHADOWOOD PARK DR
 JACKSONVILLE, FL 32225-2401 US

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

05262008 Chg-NP CR2E037 (12/06)



4. FEI Number
 59-1755559 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ELANAGAN, JACQUELIN
 11413 BEDFORD OAKS DR.
 JACKSONVILLE, FL 32225

7. Name and Address of New Registered Agent
 Name: STAN SWENSON
 Street Address (P.O. Box Number is Not Acceptable): 11400 BEDFORD OAKS DR.
 JACKSONVILLE
 City: JACKSONVILLE FL Zip Code: 32225

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: STAN SWENSON PRESIDENT DIRECTOR *Stan Swenson* DATE: 5/28/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME HOLLENBACK, LARRY STREET ADDRESS 1820 WILLOWOOD DR. CITY-ST-ZIP JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete	TITLE PD NAME STAN SWENSON STREET ADDRESS 11400 Bedford Oaks Dr. CITY-ST-ZIP JACKSONVILLE, FL. 32225	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME MOSER, DAVID STREET ADDRESS 3385 HAMPSTEAD DR CITY-ST-ZIP JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete	TITLE vpd NAME KEITH SOUTHWOOD STREET ADDRESS 11416 WHITE BAY LANE CITY-ST-ZIP JACKSONVILLE, FL. 32225	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME BERRY, DAVID STREET ADDRESS 1415 WHITE BAY LA CITY-ST-ZIP JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete	TITLE SD NAME BERNETHA WISE STREET ADDRESS 11406 WHITE BAY LANE CITY-ST-ZIP JACKSONVILLE, FL. 32225	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME FLANAGAN, JACQUELIN STREET ADDRESS 11413 BEDFORD OAKS DR CITY-ST-ZIP JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete	TITLE TD NAME HAZEL LANGENBACH STREET ADDRESS 1906 WILLOWOOD DR. CITY-ST-ZIP JACKSONVILLE, FL. 32225	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STAN SWENSON PD *Stan Swenson* Date: 5/28/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 904-641-0665 Daytime Phone