

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736472

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** SHADOWOOD COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

920 THIRD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 US

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**New Mailing Address:**

920 THIRD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 US

**FEI Number:** 59-1755559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LELAND MANAGEMENT INC  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

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

WALLACE, L. DENISE  
920 THIRD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 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: L. DENISE WALLACE

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MITCHELL, J. PAT  
Address: 920 THIRD STREET, SUITE B  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: TD  
Name: REYNOLDS, THERESA  
Address: 920 THIRD STREET, SUITE B  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: D  
Name: KILEY, ALISON C  
Address: 920 THIRD STREET, SUITE B  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D  
Name: STENGEL, KENNETH E  
Address: 920 THIRD STREET, SUITE B  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D  
Name: SWENSON, PHYLLIS  
Address: 920 THIRD STREET, SUITE B  
City-St-Zip: NEPTUNE BEACH, FL 32266

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: L. DENISE WALLACE

RA

03/22/2012

Electronic Signature of Signing Officer or Director

Date