2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744184

FILED Jaņ 13, 2<u>00</u>9 Secretary of State

Entity Name: SHAMROCK ACRES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

25 E SILVER SPRINGS BLVD 5580 W. OAKHILL STREET OCALA, FL 34470 DUNNELLON, FL 34433

Current Mailing Address: New Mailing Address:

25 E SILVER SPRINGS BLVD 5580 W. OAKHILL STREET OCALA, FL 34470 DUNNELLON, FL 34433

FEI Number: 59-1921638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOSSHARDT PROPERTY MGMT INC STAUFF, JENNIFER 5580 W. OAKHILL STREET 25 E. SILVERSPRINGS BLVD OCALA, FL 34470 DUNNELLON, FL 34433

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: JENNIFER STAUFF 01/13/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DEBUSK, JULIET DEBUSK, JULIE Name: Name: 5390 N. SIERRA VISTA DRIVE Address: 5390 N. SIERRA VISTA DRIVE Address: City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: CRYSTAL RIVER, FL 34428 Title: () Delete Title: () Change () Addition HEMBREE, JAMES Name: Name: Address: 5379 SIERRA VISTA DR Address: City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: Title: () Delete Title: (X) Change () Addition OESTERLE, MARY Name: OESTERLE, MICHAEL E Name: 5131 N. ANDRI DRIVE Address: Address: 5131 N. ANDRI DRIVE City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: CRYSTAL RIVER, FL 34428 Title: SD () Delete Title: () Change () Addition Name: ALBERT, PAM Name: 5630 N. ANDRI DR Address: Address: City-St-Zip: CRYSTAL RIVER, FL 34428 City-St-Zip: Title: Title:

() Delete () Change (X) Addition

ALBERT, BOB Name: Name: 5630 N. ANDRI DRIVE Address: Address: City-St-Zip: City-St-Zip: CRYSTAL RIVER, FL 34428

Title: () Delete Title: () Change (X) Addition

NEUBURGER, DONALD Name: Name: Address: Address: 9229 W. FAR HILLS LANE CRYSTAL RIVER, FL 34428 City-St-Zip: 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: MICHAEL E. OESTERLE **TREA** 01/13/2009