

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000708

FILED  
May 02, 2006  
Secretary of State

Entity Name: SHADY LANE VILLAGE HOME OWNERS INC.

## Current Principal Place of Business:

15666 49TH ST NORTH  
LOT 1021  
CLEARWATER, FL 33762

## New Principal Place of Business:

## Current Mailing Address:

15666 49TH ST NORTH  
LOT 1021  
CLEARWATER, FL 33762

## New Mailing Address:

FEI Number: 59-2661068      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

FORD, EDWIN I  
2310 WEST BAY DRIVE  
LARGO, FL 33540 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: PANEK-ROUNDS, SUSANN H  
Address: 15666 49TH ST NORTH, LOT 1082  
City-St-Zip: CLEARWATER, FL 33762

Title: V ( ) Delete  
Name: ELLIOT, DONALD F  
Address: 15666 49TH ST NORTH, LOT 1108  
City-St-Zip: CLEARWATER, FL 33762

Title: S ( ) Delete  
Name: ST JOHN, DOROTHY L  
Address: 15666 49TH ST NORTH, LOT 1021  
City-St-Zip: CLEARWATER, FL 33762

Title: T ( ) Delete  
Name: SHEA, ELIZABETH  
Address: 15666 49TH ST NORTH, LOT 1109  
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete  
Name: MEDERNACH, WILLIAM L  
Address: 15666 49TH ST NORTH, LOT 1085  
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete  
Name: POUCHE, CATHERINE P  
Address: 15666 49TH ST NORTH, LOT 1155  
City-St-Zip: CLEARWATER, FL 33762

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ELIZABETH A. SHEA

T

05/02/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date