

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000049

FILED
May 02, 2005
Secretary of State

Entity Name: SHANGRI-LA AT WOODMONT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11510 W. SAMPLE RD.
SUITE 5
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2176 W OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-1024481 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:

PRO PROPERTY MANANAGEMENT
2176 W OAKLAND PARK BLVD
FORT LAUDERDALE, FL 33311 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: PD () Delete
Name: ANTHONY, JOANNE
Address: 8507 CHERRY BLOSSOM LN.
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: AMBROSE, JOHN
Address: 8586 LYCHEE DR
City-St-Zip: TAMARAC, FL 33321

Title: TD () Delete
Name: FERRONE, GREG
Address: 8508 CHERRY BLOSSOM LN
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: STOREY, MIKE
Address: 8513 CHERRY BLOSSOM LANE
City-St-Zip: TAMARAC, FL 33321

Title: VD () Delete
Name: GONZALEZ, ARGELIO
Address: 8598 JADE DRIVE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: ANTHONY, JOANNE
Address: 8507 CHERRY BLOSSOM LN.
City-St-Zip: TAMARAC, FL 33321

Title: D (X) Change () Addition
Name: MAYNARD, PAT
Address: 8509 CHERRY BLOSSOM LANE
City-St-Zip: TAMARAC, FL 33321

Title: PD (X) Change () Addition
Name: FERRONE, GREG
Address: 8508 CHERRY BLOSSOM LN
City-St-Zip: TAMARAC, FL 33321

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 Section 119.07(3)(i), 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: GREG FERRONE

PD

05/02/2005

Electronic Signature of Signing Officer or Director

_____ Date