

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000010962

FILED
Feb 07, 2012
Secretary of State

Entity Name: SHADOW BROOK WATER AND SEWER MANAGEMENT, INC.

Current Principal Place of Business:

6710 ELLENTON GILLETTE RD., #400
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 811
PALMETTO, FL 34220 US

New Mailing Address:

FEI Number: 59-3163919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARKINSON, MICHAEL
6710 ELLENTON GILLETTE RD #62
PALMETTO, FL 34221 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: D
Name: ROWICKI, PATRICK
Address: 6710 ELLENTON-GILLETTE RD
City-St-Zip: PALMETTO, FL 34221

Title: VP
Name: EWAIN, LAWRENCE
Address: 6710 ELLENTON GILLETTE RD #210
City-St-Zip: PALMETTO, FL 34221

Title: P
Name: HARKINSON, MICHAEL
Address: 6710 ELLENTON GILLETTE RD #62
City-St-Zip: PALMETTO, FL 34221

Title: DS
Name: ZILLMAN, RON
Address: 6710 ELLENTON-GILLETTE RD #120
City-St-Zip: PALMETTO, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL HARKINSON

P

02/07/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date