

FILE NOW: FILING FEE IS \$61.25

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Mar 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N 97000000708**
1. Corporation Name
SHADY LANE VILLAGE HOME OWNERS INC.

Principal Place of Business 15666 49TH ST. N. LOT 1006 CLEARWATER, FL. 33762 US	Mailing Address 15666 49TH ST. N. LOT 1006 CLEARWATER, FL. 33762 US
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3. Date Incorporated or Qualified 02/06/1997	Applied For ☐	Not Applicable ☒
4. FEI Number 59-2661068		

2. Principal Place of Business 21 15666 49TH ST. N.	2a. Mailing Address 26 15666 49TH ST. N.	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
Suite, Apt. #, etc. 22 LOT 1006	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
City & State 23 CLEARWATER FL	City & State 28	7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No
Zip 24 33762	Country 25 PINELLAS	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No
Zip 29	Country 30	

9. Name and Address of Current Registered Agent FORD, EDWIN I. 2310 WEST BAY DRIVE LARGO, FL. 33540	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBINSON, QUENTIN 15666 49TH ST. N. LOT 1142 CLEARWATER, FL. 33762 ☐ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	THOMAS HUDSON 15666 49TH ST. N. LOT 1045 CLEARWATER, FL. 33762 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KUYKENDALL, BARBERA 15666 49TH ST. N. LOT 1100 CLEARWATER, FL. 33762 ☐ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	CARL HARRIS 15666 49TH ST. N. LOT 1062 CLEARWATER, FL. 33762 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WATNOUGH, JANE 15666 49TH ST. N. LOT 1145 CLEARWATER, FL. 33762 ☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	JEAN BITTER 15666 49TH ST. N. LOT 1028 CLEARWATER, FL. 33762 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANDERSON, CHARLES 15666 49TH ST. N. LOT 1006 CLEARWATER, FL. 33762 ☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	500002468285 -03/25/98--01076--009 ***\$61.25 ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Charles J. Anderson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CHARLES J. ANDERSON

3/5/98 Date **813-530-7466** Daytime Phone #

CR2E037 (10/97)