2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2009
Secretary of State

DOCUMENT# N03000001731

Entity Name: SHANNON'S WALK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4794 51ST CT
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

4794 51ST CT
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: 02-0671259 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, MARCIA
4794 51ST COURT
VERO BEACH, FL 32967 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: MCKINNON, DAVID
Address: 4865 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: VP ( ) Delete
Name: LOPEZ, ALEX
Address: 4722 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: S ( ) Delete
Name: JENNINGS, JACALYN
Address: 4855 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: T ( ) Delete
Name: MILLER, MARCIA
Address: 4794 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: D ( ) Delete
Name: POLVAN, JAY
Address: 4819 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition
Name: PULLMAN, RUTH
Address: 4759 51ST CT
City-St-Zip: VERO BEACH, FL 32967

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

Title: D (X) Change ( ) Addition
Name: BEAULIEU, DICK
Address: 4843 51ST CT
City-St-Zip: VERO BEACH, FL 32967

Title: D ( ) Change (X) Addition
Name: SCHMITZ, VIVIAN
Address: 4735 51ST CT
City-St-Zip: VERO BEACH, FL 32967

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: MARCIA M MILLER T 04/05/2009

Electronic Signature of Signing Officer or Director — Date