2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#743920

FILED Jaņ 1<u>5, 2</u>010 Secretary of State

Entity Name: SHADYWOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4500 SHADYWOOD DRIVE GULFSTREAM MANAGEMENT SERVICES DELRAY BEACH, FL 33445

1500 GATEWAY BLVD. SUITE 220 BOYNTON BEACH, FL 33426

Current Mailing Address: New Mailing Address:

GULFSTREAM MANAGEMENT SERVICES 4500 SHADYWOOD DRIVE DELRAY BEACH, FL 33445 1500 GATEWAY BLVD. SUITE 220

BOYNTON BEACH, FL 33426

FEI Number: 59-1912289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUBIN, STEVEN D VICTORY ACCOUNTING SERVICES 980 N. FEDERAL HIGHWAY, #434

1500 GATEWAY BLVD. BOCA RATON, FL 33432 SUITE 220

BOYNTON BEACH, FL FL US

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: VICKI FEICHT 01/15/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PRES

KLEIN, SYLVIA PRES Name:

Address: 4325 PALM FOREST DRIVE NORTH City-St-Zip: DELRAY BEACH, FL 33445

Title:

Name: DAVIS, GENE VP

Address: 4086 PALM FOREST DRIVE SOUTH

City-St-Zip: DELRAY BEACH, FL 33445

Title: DIR

BOURKE, DOLORES DIR Name: 4146 PALM FOREST DRIVE SOUTH Address:

City-St-Zip: DELRAY BEACH, FL 33445

Title: DIR

Name: BELEC, PATTY DIR

4221 PALM FOREST DRIVE SOUTH Address:

City-St-Zip: DELRAY BEACH, FL 33445

Title: **TRES**

MCCAFFREY, HUGH TRES Name: 4140 PALM FOREST DRIVE NORTH Address:

City-St-Zip: DELRAY BEACH, FL 33445

Title:

GUENTHER. RONNIE L SEC Name: Address: 4130 PALM FOREST DRIVE SOUTH DELRAY BEACH, FL 33445 City-St-Zip:

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

SIGNATURE: BRENT THERIAULT **MGR** 01/15/2010