

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90055 029 ****61.25

DOCUMENT # **N97000000708**

1. Entity Name

SHADY LANE VILLAGE HOME OWNERS INC.



Principal Place of Business

**15666 49TH ST NORTH
LOT 1037
CLEARWATER FL 33762**

Mailing Address

**15666 49TH ST NORTH
LOT 1037
CLEARWATER FL 33762**

2. Principal Place of Business

15666 49th St. North

3. Mailing Address

15666 49th St. North

Suite, Apt. #, etc.

LOT 1025

Suite, Apt. #, etc.

LOT 1025

City & State

CLEARWATER FL.

City & State

CLEARWATER FL.

Zip

33762

Country

USA

Zip

33762

Country

USA

4. FEI Number **59-2661068**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FORD, EDWIN I
2310 WEST BAY DRIVE
LARGO FL 33540**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HUDSON, TOM	
STREET ADDRESS	15666 49TH STREET NORTH LOT 1045	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	JUDSON, JOHN	
STREET ADDRESS	15666 49TH ST NORTH LOT 1037	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	RAETHER, PATRICIA	
STREET ADDRESS	15666 49TH ST NORTH LOT 1008	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	HARRIS, CARL R	
STREET ADDRESS	15666 49TH STREET NORTH LOT 1062	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HEATH, SUE	
STREET ADDRESS	15666 49TH ST NORTH LOT 1069	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HEATH, SAMUAL	
STREET ADDRESS	15666 49TH ST NORTH LOT 1069	
CITY-ST-ZIP	CLEARWATER FL 33762	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Judson John	
STREET ADDRESS	15666 49th St. No. 107 1087	
CITY-ST-ZIP	CLEARWATER, FL, 33762	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John Holleman	
STREET ADDRESS	15666 49th St. No. Lot 1127	
CITY-ST-ZIP	CLEARWATER, FL, 33762	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REGESTER ISABELLE	
STREET ADDRESS	15666 49th St. No. Lot 1084	
CITY-ST-ZIP	CLEARWATER, FL, 33762	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMERSTROM BARBARA	
STREET ADDRESS	15666 49th St. No. Lot 1025	
CITY-ST-ZIP	CLEARWATER, FL, 33762	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHASE ELEANOR	
STREET ADDRESS	15666 49th St. No. Lot 1029	
CITY-ST-ZIP	CLEARWATER, FL 33762	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUE SHIRLEY	
STREET ADDRESS	15666 49th St. No. Lot 1093	
CITY-ST-ZIP	CLEARWATER, FL 33762	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 3/6/03 5317138

CR2E037 (10/02)