2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721943

FILED
Mar 23, 2020
Secretary of State
1714186194CC

Entity Name: SHELTER COVE RESORT CONDOMINIUM, INC.

Current Principal Place of Business:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779

Current Mailing Address:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 US

FEI Number: 59-2396951

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 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: BRADLEY POMP 03/23/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	LEQUE, CAROL
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	SECRETARY, TREASURER, DIRECTOR
Name	PENNINGTON, CAROLE
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	DIRECTOR
Name	WILLIS, SCOTT
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	DIRECTOR
Name	HOWARD, TERRY
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	VP, DIRECTOR
Name	FASSBENDER, BARBARA
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	DIRECTOR
Name	BELL, MIKE
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

Title	DIRECTOR
Name	VAN KIRK, WILLIAM
Address	2180 WEST SR 434 STE 5000
City-State-Zip:	LONGWOOD FL 32779

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: CAROL LEQUE PRESIDENT 03/23/2020

Electronic Signature of Signing Officer/Director Detail — Date