

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732268

Entity Name: SHOCKLEY HILL CLUB INC.**Current Principal Place of Business:**20335 BLUE WING ROAD
ALTOONA, FL 32702**Current Mailing Address:**P. O. BOX 583
ALTOONA, FL 32702 US**FEI Number:** 59-1647615**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLOYS, ROSALIE
20414 GADWELL ROAD
ALTOONA, FL 32702 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	ROGERS, PHILIP
Address	20407 WOODDUCK RD
City-State-Zip:	ALTOONA FL 32702

Title	TREASURER
Name	ROGERS, DEBBIE
Address	20407 WOODDUCK ROAD
City-State-Zip:	ALTOONA FL 32702

Title	VP
Name	PRIEST, JEANI
Address	20406 BLUE WING ROAD
City-State-Zip:	ALTOONA FL 32702

Title	SECRETARY
Name	NORDMARK, CHRISTINE
Address	47124 EAST DEER ROAD
City-State-Zip:	ALTOONA FL 32702

Title	TRUSTEE
Name	NORDMARK, STEPHEN B
Address	47124 EAST DEER ROAD
City-State-Zip:	ALTOONA FL 32702

Title	TRUSTEE
Name	FRICK, ALLAN
Address	20329 BLACK DUCK RD
City-State-Zip:	ALTOONA FL 32702

Title	TRUSTEE
Name	BLOYS, ROSALIE
Address	20414 GADWELL ROAD
City-State-Zip:	ALTOONA FL 32702

Title	TRUSTEE
Name	PRIEST, BARRY
Address	20406 BLUE WING ROAD
City-State-Zip:	ALTOONA FL 32702

Continues on page 2

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: CHRISTINE NORDMARK**SECRETARY****02/05/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	TRUSTEE
Name	WHITE, JAMES
Address	20406 BLUE WING ROAD
City-State-Zip:	ALTOONA FL 32702