## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736472** 

Entity Name: SHADOWOOD COMMUNITY ASSOCIATION, INC.

FILED Apr 14, 2022 Secretary of State 9142665096CC

## **Current Principal Place of Business:**

C/O THE CAM TEAM 2233 PARK AVE.103 ORANGE PARK, FL 32073

## **Current Mailing Address:**

C/O THE CAM TEAM 2233 PARK AVE.103 ORANGE PARK, FL 32073 US

FEI Number: 59-1755559 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

THE CAM TEAM, INC C/O THE CAM TEAM 1008-120 PARK AVENUE ORANGE PARK, FL 32073 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: GINA M. CABRAL 04/14/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name WEIKLE, PAUL Name STARZACHER, BRENT

Address C/O THE CAM TEAM Address C/O THE CAM TEAM

2233 PARK AVE.103 2233 PARK AVE.103

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: ORANGE PARK FL 32073

 Title
 TREASURER
 Title
 SECRETARY

 Name
 KILEY, ALISON
 Name
 FLYNN, LAURA

Address C/O THE CAM TEAM Address C/O THE CAM TEAM

2233 PARK AVE.103 2233 PARK AVE.103

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR
Name LENNY, NAS

Address C/O THE CAM TEAM

2233 PARK AVE. 103

City-State-Zip: ORANGE PARK FL 32073

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: PAUL WEIKLE PRESIDENT 04/14/2022