

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743920

Entity Name: SHADYWOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
BOYNTON BEACH, FL 33426

Current Mailing Address:

GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
BOYNTON BEACH, FL 33426

FEI Number: 59-1912289

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KONYK & LEMME, PLLC
777 S. FLAGLER DRIVE
SUITE 800-WEST TOWER
WEST PALM BEACH, FL 33401 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: CHELLE KONYK

04/19/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VICE PRESIDENT
Name SCADUTO, DOMINIC
Address GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
City-State-Zip: BOYNTON BEACH FL 33426

Title TREASURER
Name BROOKS, MARSHALL
Address GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
City-State-Zip: BOYNTON BEACH FL 33426

Title PRESIDENT
Name DENNEHEY, JOHN
Address GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name HANSON, BRIAN
Address GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name HILSTROM, KELLY
Address GULFSTREAM MANAGEMENT SERVICES
1500 GATEWAY BLVD. SUITE220
City-State-Zip: BOYNTON BEACH FL 33426

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: JOHN DENNEHEY

PRESIDENT

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date