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: JUDY HALPIN	PRESIDENT	03/27/2018		

DOCUMENT# N0200009307

Entity Name: NORTHRIDGE AT SHADOW WOOD NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAY LANDING DR. SUITE 4 BONITA SPRINGS, FL 34135

Current Mailing Address:

27180 BAY LANDING DR. SUITE 4 BONITA SPRINGS, FL 34135

FEI Number: 22-3888990

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES, INC. 27180 BAY LANDING DR SUITE 4 BONITA SPRINGS, FL 34135 US Certificate of Status Desired: No

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.

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SIGNATURE	E: JAMES O'DONNELL			03/27/2018
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DP	Title	VP	
Name	HALPIN, JUDY	Name	GALEESE, JANET	
Address	27180 BAY LANDING DR. SUITE 4	Address	27180 BAY LANDING DR. SUITE 4	
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135	
Title	DST			
Name	FUEHRER, WALT			
Address	27180 BAY LANDING DR. SUITE 4			
City-State-Zip:	BONITA SPRINGS FL 34135			

Electronic Signature of Signing Officer/Director Detail

FILED Mar 27, 2018 Secretary of State CC8229057133