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 KILBURN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0300002526

Entity Name: SHADY OAKS OF ARCADIA OWNERS ASSOCIATION, INC

Current Principal Place of Business:

5792 NE CUBITIS AVENUE LOT A-4 ARCADIA, FL 34266

Current Mailing Address:

5792 NE CUBITIS AVENUE LOT A-4 ARCADIA, FL 34266 US

FEI Number: 57-1158017

Name and Address of Current Registered Agent:

NAULT, CHRIS 5792 N E CUBITIS AVE ARCADIA, FL 34266 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.

SIGNATURE	CHRIS NAULT			01/10/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	Т		
Name	ANDERSON, MARSHALL MR	Name	KILBURN, JUDY		
Address	5792 NE CUBITIS AVE., C1	Address	5792 NE CUBITIS AVENUE, A-4	4	
City-State-Zip:	ARCADIA FL 34266	City-State-Zip:	ARCADIA FL 34266		
Title	S	Title	VP		
Name	KOON, CAROL MRS	Name	NAULT, CHRIS		
Address	5792 NE CUBITIS AVENUE A6	Address	5792 NE CUBITIS AVENUE		
City-State-Zip:	ARCADIA FL 34266	City-State-Zip:	LOT A-1 ARCADIA FL 34266		

01/10/2017

FILED Jan 10, 2017 Secretary of State CC9066214580

TREASURER

Date