

**2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04000012123

**Entity Name:** SHALLOW REED PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Mar 26, 2015**  
**Secretary of State**  
**CR0089538823**

**Current Principal Place of Business:**

505 MONUMENT AVE  
PO BOX 280  
PORT ST. JOE, FL 32457

**Current Mailing Address:**

PO BOX 280  
PORT ST. JOE, FL 32457 US

**FEI Number: 25-1913985**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LEEBRICK, BRIAN DESQ.  
220 MCKENZIE AVE.  
PANAMA CITY, FL 32401 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: BRIAN LEEBRICK**

**03/26/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name WARRINER, DAVID  
Address 505 MONUMENT AVE.  
PO BOX 280  
City-State-Zip: PORT ST. JOE FL 32457

Title D  
Name PICKETT, RONALD  
Address 505 MONUMENT AVE.  
PO BOX 280  
City-State-Zip: PORT ST. JOE FL 32457

Title D  
Name SEWARD, BOBBI  
Address 505 MONUMENT AVE.  
PO BOX 280  
City-State-Zip: PORT ST. JOE FL 32457

*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: DAVID P WARRINER**

**D**

**03/26/2015**

Electronic Signature of Signing Officer/Director Detail

Date