

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012095

Entity Name: SHADOWOOD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

520 E. FORT KING ST., B-2
OCALA, FL 34471

Current Mailing Address:

PO BOX 3630
OCALA, FL 34478 UN

FEI Number: 20-5942569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESSLEY, RALPH WJR
520 E. FORT KING ST., B-2
OCALA, FL 34471 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DPST
Name PRESSLEY, RALPH WJR.
Address 520 SE FORT KING ST., B2
City-State-Zip: Ocala FL 34471

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: RALPH PRESSLEY

MMBR

04/22/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date