2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006178

Entity Name: SHADOW WOOD CHARITABLE FOUNDATION, INC.

FILED Apr 16, 2013 Secretary of State CC8189304038

Current Principal Place of Business:

9815 BAY MEADOW

BONITA SPRINGS. FL 34135

Current Mailing Address:

9815 BAY MEADOW

BONITA SPRINGS. FL 34135

FEI Number: 38-3881140 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HART, THOMAS BESQ. KNOTT, EBELINI, HART 1625 HENDRY STREET, SUITE 301 FORT MYERS, FL 33901 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:

TRUSTEE AND PRESIDENT Title Title **TRUSTEE**

Name LENTZ. WILLIAM B Name COURTNEY, DAVID W

Address 9815 BAY MEADOW Address 22331 BANYAN HIDEAWAY DRIVE

City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135

Title TRUSTEE AND SECRETARY Title TRUSTEE AND TREASURER

DEVITT, SUZANNE B Name Name HOBERT, JR., CHESTER A Address 23315 FOXBERRY LANE Address 23132 FOXBERRY LANE

BONITA SPRINGS FL 34135 City-State-Zip: **BONITA SPRINGS FL 34135** City-State-Zip:

Title **TRUSTEE** Title TRUSTEE

LANE, JERRY R Name ACORN, LARRY Name

Address 10104 ORCHID RIDGE LANE Address 22101 RESERVE ESTATES DRIVE City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip: **BONITA SPRINGS FL 34135**

Title TRUSTEE Title TRUSTEE

Name WOERNER, THEODORE P Name NICOLETTI. SUSAN B

Address 9597 CYPRESS HAMMOCK, #102 Address 10104 IDLE PINE LANE BONITA SPRINGS FL 34135

City-State-Zip: City-State-Zip: **BONITA SPRINGS FL 34135**

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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: CHESTER A. HOBERT, JR.

TRUSTEE AND **TREASURER**

04/16/2013

Officer/Director Detail Continued:

Title TRUSTEE

Name YOUNG, LILLIAN M

Address 10041 GINGER POINTE COURT
City-State-Zip: BONITA SPRINGS FL 34135