

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000000708

**Entity Name:** SHADY LANE VILLAGE HOME OWNERS INC.**Current Principal Place of Business:**15666 49TH ST NORTH  
LOT 1061  
CLEARWATER, FL 33762**Current Mailing Address:**15666 49TH ST NORTH  
LOT 1061  
CLEARWATER, FL 33762**FEI Number:** 59-2661068**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FORD, EDWIN I  
2310 WEST BAY DRIVE  
LARGO, FL 33540 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	P
Name	TEDSTONE, LARRY
Address	15666 49TH ST NORTH, LOT 1012
City-State-Zip:	CLEARWATER FL 33762

Title	VP
Name	HALLECK, MARGARET
Address	15666 49TH ST NORTH, LOT 1047
City-State-Zip:	CLEARWATER FL 33762

Title	S
Name	RENGEL, SHARON
Address	15666 49TH ST NORTH, LOT 1036
City-State-Zip:	CLEARWATER FL 33762

Title	T
Name	VAIL, MARILYN J
Address	15666 49TH ST NORTH, LOT 1061
City-State-Zip:	CLEARWATER FL 33762

Title	D
Name	COUGHLIN, PATRICK
Address	15666 49TH ST NORTH, LOT 1060
City-State-Zip:	CLEARWATER FL 33762

Title	D
Name	HAMERSTROM, BARBARA
Address	15666 49TH ST NORTH, LOT 1025
City-State-Zip:	CLEARWATER FL 33762

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:** MARILYN J VAIL**TREASURER****01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date