

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002869

FILED
Apr 12, 2018
Secretary of State
CC1753714812

Entity Name: SHADOW OAKS II PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6454 RIDGE RD
PORT RICHEY, FL 34668

Current Mailing Address:

PO BOX 1407
PORT RICHEY, FL 34673 US

FEI Number: 59-3592238

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COASTAL HOA MANAGEMENT SERVICES INC
6454 RIDGE RD
PORT RICHEY, FL 34668 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: MARYANN SYRASKI

04/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name ROBY, JAMIE MRS.
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

Title DIRECTOR
Name COLLINS, BRIAN
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

Title DIRECTOR
Name THIEMANN, ERIC
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

Title TREASURER
Name MEDVESKY, ROBERT
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

Title DIRECTOR
Name ABER, THERESA MRS.
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

Title PRESIDENT
Name MILNE, LARRY
Address PO BOX 1407
City-State-Zip: PORT RICHEY FL 34673

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: LARRY MILNE

PRESIDENT

04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date