

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J46740

**Entity Name:** SHADY SPRINGS FARM, INC.

**Current Principal Place of Business:**

40 77 AVE  
APT A  
TREASURE ISLAND, FL 33706

**Current Mailing Address:**

40 77 AVE  
APT A  
TREASURE ISLAND, FL 33706 US

**FEI Number:** 59-2745267

**Certificate of Status Desired:** No

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

CASHMAN, GAIL  
40 77 AVE  
APT A  
TREASURE ISLAND, FL 33706 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 PD  
Name CASHMAN, GAIL  
Address 40 77 AVE APT. A  
City-State-Zip: TREASURE ISLAND FL 33706

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GAIL I CASHMAN

**PRESIDENT**

**03/19/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date