

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722594

FILED
Apr 11, 2008
Secretary of State

Entity Name: SHADOWOOD VILLAGE, INC.

Current Principal Place of Business:

2180 WEST ST 434, SUITE 5000
LONGWOOD, FL 327795044 US

Current Mailing Address:

2180 WEST ST 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

2180 WEST ST 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

2180 WEST ST 434
SUITE 5000
LONGWOOD, FL 327795044 US

FEI Number: 59-1516040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W SR 434 STE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: JAMES W HART JR

04/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WOLFF, RICHARD
Address: 108 STARLING LN
City-St-Zip: LONGWOOD, FL 32779

Title: T () Delete
Name: DAVIS, MICHELLE
Address: 105 WILD HOLLY LANE
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: SHAKAR, ROBERT
Address: 125 RED CEDAR
City-St-Zip: LONGWOOD, FL 32779

Title: P () Delete
Name: PETERSON, MIKEL
Address: 205 WEEPING ELM
City-St-Zip: LONGWOOD, FL 32779

Title: VPD () Delete
Name: KAISER, THEODORE
Address: 104 WEEPING ELM LN
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: BAYNE, MARION
Address: 107 RED CEDAR DR
City-St-Zip: LONGWOOD, FL 32779

Title: TD (X) Change () Addition
Name: WOLFF, DICK
Address: 108 STARLING LN
City-St-Zip: LONGWOOD, FL 32779

Title: PD (X) Change () Addition
Name: SHAKAR, ROBERT
Address: 125 RED CEDAR DR
City-St-Zip: LONGWOOD, FL 32779

Title: D (X) Change () Addition
Name: HOUCHINS, DORIS
Address: 114 WILD HOLLY LN
City-St-Zip: LONGWOOD, FL 32779

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT SHAKAR

PD

04/11/2008

Electronic Signature of Signing Officer or Director

Date