

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90036 036 ****70.00



DOCUMENT # 726498
 1. Entity Name
SHEOAH HIGHLANDS THREE, INC.

Principal Place of Business Mailing Address
680 WEST S.R. 434 **P.O. BOX 195771**
STE 101 **WINTER SPRINGS FL 32719-5771**
WINTER SPRINGS FL 32708 **US**
US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State City & State

4. FEI Number Applied For
59-1470061 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PAINE-ANDERSON PROPERTIES, INC.
680 W. SR-434
SUITE 101
WINTER SPRINGS FL 32708

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Karen Paine-Malcolm* **Karen Paine-Malcolm** **4/8/08**
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature is not used when constituting) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	SINSAR, JUNE	
STREET ADDRESS	413-Z SHEDAH BLVD	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHEELER, LINDA	
STREET ADDRESS	417-24 SHEOAH BLVD.	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KENNEDY, JUDY	
STREET ADDRESS	413-7 SHEOAH BLVD	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	BONOTTO, SUSAN	
STREET ADDRESS	415-12 SHEOAH BLVD.	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sinsar, June	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	wheeler, Linda	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lindsey, Suzan	
STREET ADDRESS	417-19 Sheoah Blvd	
CITY-ST-ZIP	Winter Springs, FL 32708	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda R. Wheeler* **Linda R. Wheeler** **President** **4/9/08** **407 645-7898**