

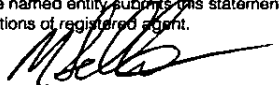
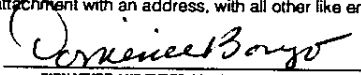


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90094 043 ****61.25

DOCUMENT # 729761 1. Entity Name SHANGRI-LA HOME OWNERS ASSOCIATION AT PALM COAST, INC.					
Principal Place of Business 334 PALM COAST PKWY NE PALM COAST, FL 32137			Mailing Address P O BOX 351308 PALM COAST, FL 32137		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01042007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-1969958	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BELLAPIANTA, MARC 21 OLD KINGS RD N STE B-209 PALM COAST, FL 32137			7. Name and Address of New Registered Agent Name Marc Bellapianta Street Address (P.O. Box Number is Not Acceptable) 17 Old Kings Road North Suite B City Palm Coast FL Zip Code 32137		
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 		Marc Bellapianta, Prop. Mgr.		3-9-07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRENDERVILLE, JOHN J 16 COOPER LANE PALM COAST, FL 32137	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WARGOCKI, BARBARA 306 PALM COAST PKWY #102 PALM COAST, FL 32137	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BONGO, DOMINIC 66 W CEDAR LANE PALM COAST, FL 32137	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS, MURIEL 314 PALM COAST PKWY PALM COAST, FL 32137	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRANCACCIO, BARBARA 20 FERNHAM LANE PALM COAST, FL 32137	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRANCACCIO, BARBARA 20 FERNHAM LANE PALM COAST, FL 32137	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  DOMINIC BONGO, PRESIDENT 3-9-07 (386) 445-9282					