


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90413 023 ****61.25

DOCUMENT # 730316		
1. Entity Name SHADY REST PROPERTY OWNERS ASSOCIATION, INC.		
Principal Place of Business 13225 US 1 LOT 59 SEBASTIAN FL 32958 US		Mailing Address 13225 US 1 LOT 59 SEBASTIAN FL 32958 US
2. Principal Place of Business - No P.O. Box # 13225 U.S. Hwy One Suite, Apt. #, etc.		3. Mailing Address 13225 U.S. Hwy. One Suite, Apt. #, etc.
Lot 59 City & State Sebastian, Fl.		Lot 59 City & State Sebastian, Fl.
Zip 32958	Country Indian River	Zip 32958
6. Name and Address of Current Registered Agent BRANKS, RUTH 13225 US 1 LOT 59 SEBASTIAN FL 32958		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		



1st MOORE CR2E037 (10/06)

4. FEI Number NO-T APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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FILE NOW: 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	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RANAHAN, CLAIRE 13225 U.S. HWY. 1 LOT A-12 SEBASTIAN, FL 32958	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Clare Ranahan 13225 U.S. Hwy One Lot A-12 SEBASTIAN, FL 32958	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WUILLAMEY, ED 13225 US 1, LOT 89 SEBASTIAN FL 32958	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. Norma Jean Sanderson 13225 U.S. Hwy. One Lot 117 Sebastian, Fl. 32958	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SECAMIGLIO, CATHY 13225 US 1, LOT 107 SEBASTIAN FL 32958	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S. Ruth Branks 13225 U.S. Hwy. One Lot 59 Sebastian, Fl. 32958	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR SPURLOCK, MARGARET 13225 U.S. HWY 1 LOT 4 SEBASTIAN FL 32958	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Margaret Spurlock 13225 U.S. Hwy. One Lot 4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WUILLAMEY, JOAN 13225 U.S. HWY. 1 LOT 89 SEBASTIAN FL 32958	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Evelynn Rupp 13225 U.S. Hwy. One Lot 38 Sebastian, Fl. 32958	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORR, WM. 13225 U.S. HWY. 1 LOT 57 SEBASTIAN FL 32958	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bonnie Briggs 13225 U.S. Hwy. One Lot A-8 Sebastian, Fl. 32958	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. 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: *Ruth M Branks*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

ATTACHMENT 40071778
#730316

D

Art Corriveau
13225 U.S.Hwy. One Lot33
Sebastian, Fl/ 32958

RE CHANGE