## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#730316** 

FILED Apr 13, 2009 Secretary of State

Entity Name: SHADY REST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 13225 U.S. HWY ONE **LOT 89** SEBASTIAN, FL 32958 **New Mailing Address: Current Mailing Address:** 13225 U.S. HWY ONE **LOT 89** SEBASTIAN, FL 32958 US FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BINKA, CAROL 13225 US 1 **LOT 89** SEBASTIAN, FL 32958 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition RANAHAN, CLAIRE BINKA, THOMAS Name: Name: 13225 U.S. HWY ONE LOT A-12 Address: 13225 U.S. HWY ONE LOT 89 Address: SEBASTIAN, FL 32958 City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: Title: ( ) Delete () Change () Addition WORTHEN, GARY Name: Name: Address: 13225 US HWY 1 LOT 12 Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: () Delete Title: () Change () Addition BINKA, CAROL Name: Name: Address: 13225 US HWY 1 LOT 89 Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: TR ( ) Delete Title: () Change () Addition Name: BRANKS, RUTH Name: 13225 US HWY 1 LOT 59 Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: () Delete Title: () Change () Addition RUPP, EVELYNN Name: Name: 13225 U.S. HWY ONE LOT 38 Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition LARRABEE, KEN RANAHAN, CLAIRE Name: Name: Address: 13225 US HWY 1 LOT 107 Address: 13225 US HWY 1 LOT A 12 SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 City-St-Zip: 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: CAROL J. BINKA SEC. 04/13/2009