

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730499

FILED
Aug 13, 2009
Secretary of State

Entity Name: SHADOWLAWN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

923 22ND PLACE
VERO BEACH, FL 32960

New Principal Place of Business:

923 22ND PLACE
101
VERO BEACH, FL 32960

Current Mailing Address:

923 22ND PLACE
101
VERO BEACH, FL 32960

New Mailing Address:

923 22ND PLACE
220
VERO BEACH, FL 32960

FEI Number: 59-1619366 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROMEO, EUGENE M
923 22ND PLACE, A-220
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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:

Title: VPDT () Delete
Name: SMITH, DEAN A
Address: 135 POMEROY AVE
City-St-Zip: CRYSTAL LAKE, IL 60014

Title: PD () Delete
Name: SLIMAK, HENRIETTA
Address: 923 22ND PLACE, APT. 116
City-St-Zip: VERO BEACH, FL 32960

Title: SD () Delete
Name: ROMEO, EUGENE M
Address: 923 22ND PLACE, APT. 220
City-St-Zip: VERO BEACH, FL 32960

Title: T () Delete
Name: SMITH, MICHAEL
Address: 923 22ND PL APT 109
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MICHAEL SMITH

TREA

08/13/2009

Electronic Signature of Signing Officer or Director

Date