

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90083 016 ****61.25

DOCUMENT # 730499

1. Entity Name
SHADOWLAWN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**923 22ND PLACE
VERO BEACH FL 32960**

Mailing Address

**923 22ND PLACE
VERO BEACH FL 32960**

2. Principal Place of Business

3. Mailing Address

923 22nd Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

101

City & State

City & State

Vero Beach, FL

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip

Country

Zip

Country

32960

Indian River

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROMEO, EUGENE M
923 22ND PLACE, APT. 220
VERO BEACH FL 32960**

Name **John F. Winter**

Street Address (P.O. Box Number is Not Acceptable)
923 22nd Place #219

City **Vero Beach**

FL

Zip Code
32960

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/06/03

DATE

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **VINCENTI, MARIO**
STREET ADDRESS **923 22ND PLACE, APT. 112**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **WINTER, JOHN F**
STREET ADDRESS **923 22ND PL # 201** ← change to 219
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE **TD** ☒ Change ☐ Addition
NAME **Winter, John F**
STREET ADDRESS **923 22nd PL #219**
CITY-ST-ZIP **Vero Beach FL 32960**

TITLE **VPD** ☐ Delete
NAME **SMITH, DEAN A**
STREET ADDRESS **135 POMEROY AVE**
CITY-ST-ZIP **CRYSTAL LAKE IL 60014**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☐ Delete
NAME **SLIMAK, HENRIETTA**
STREET ADDRESS **923 22ND PLACE, APT. 116**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **ROMEO, EUGENE M**
STREET ADDRESS **923 22ND PLACE, APT. 220**
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *[Signature]* **SIGNATURE REQUIRED** **John F. Winter** **01/06/03** **773 794-4512**

CR2E037 (10/02)