## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#754790** 

FILED Apr 30, 2009 Secretary of State

Entity Name: SHADOWBAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O HARA MANAGEMENT, INC. 931 S. SEMORAN BLVD. 931 S. SEMORAN BLVD. 931 S. SEMORAN BLVD.

WINTER PARK, FL 32792 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

C/O HARA MANAGEMENT, INC. 931 S. SEMORAN BLVD. 931

FEI Number: 59-0214451 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HARA, ROBERT
C/O HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD. #214

HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD.
SUITE # 214

WINTER PARK, FL 32792 US WINTER PARK, FL 32792 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.

in the otate of Florida.

SIGNATURE: ROBERT HARA 04/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: DALRYMPLE, RICK Name: ESPINOSA, FABIO

Name: DALRYMPLE, RICK Name: ESPINOSA, FABIO
Address: 212 MONTEREY ISLE NORTH Address: 231 S. SHADOWBAY BLVD.
City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: LONGWOOD, FL 32779

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

Name: ZIRKEL, JAMES Name: MELILLO, JOANNE

 Address:
 219 MONTEGO INLET BAY
 Address:
 218 N. MONTEREY ISLE BLVD

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 YANOVITCH, TERI
 Name:

 Address:
 224 S. SHADOW BAY BLVD.
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 VOSS, SHARON
 Name:

 Address:
 195 S. MONTEREY ISLE BLVD.
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLOODSWORTH, DENISE
 Name:

 Address:
 213 N. MONTERERY ISLE BLVD.
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: MELILLO, JOANNE Name: ZIRKEL, JAMES

 Name:
 MELILLO, JOANNE
 Name:
 ZIRKEL, JAMES

 Address:
 218 N. MONTERERY ISLE BLVD.
 Address:
 219 MONTEGO INLET BLVD

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

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: FABIO ESPINOSA PRES 04/30/2009

Electronic Signature of Signing Officer or Director

Date