2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008
Secretary of State

DOCUMENT# 756886

Entity Name: SHELL POINT HARBOR PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

145 ROYSTER DR.
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

145 ROYSTER DR.
CRAWFORDVILLE, FL 32327 US

New Mailing Address:

FEI Number: 59-2162921 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

WELLS, DEDE
145 ROYSTER DR
CRAWFORDVILLE, FL, FL 32327 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: PD ( ) Delete
Name: WELLS, DEDE
Address: 145 ROYSTER DR
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: S ( ) Delete
Name: WEBSTER, CINDY
Address: 125 ROYSTER DR
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: SGD ( ) Delete
Name: BROADWAY, DUANE
Address: 57 ROYSTER DR
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: T ( ) Change (X) Addition
Name: BIRDWELL, WILLIAM
Address: 139 ROYSTER DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

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: DEDE WELLS PD 05/22/2008

Electronic Signature of Signing Officer or Director — Date