2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759501

FILED May 01, 2006 Secretary of State

Entity Name: SHADOWLAWN HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2357 HARTSFIELD WAY TALLAHASSEE, FL 32303 US **Current Mailing Address: New Mailing Address:** 2357 HARTSFIELD WAY TALLAHASSEE, FL 32303 US FEI Number: 59-2931800 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: Name and Address of New Registered Agent: MARSHALL, DALLAS 3108 LIVINGSTON RD TALLAHASSEE, FL 32303 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: (X) Change () Addition () Delete DILL, ROGER MARSHALL, DALLAS Name: Name: 6709 TIM TAM TRIAL Address: 3108 LIVINGSTON RD Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: (X) Change () Addition SINGLETON, KEITH Name: SINGLETON, KEITH Name: Address: 2317 HARTSFIELD WAY Address: 2317 HARTSFIELD WAY City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: (X) Change () Addition HUTCHISON, ANNA KAY HUTCHISON, ANNA KAY Name: Name: 2337 HARTSFIELD WAY Address: 2337 HARTSFIELD WAY Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: DT () Change (X) Addition Name: Name: BRITTAIN, RASHID 2309 HARTSFIELD WAY Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: () Change (X) Addition HUGHES-BRAND, SHEA Name: Name: 2276 HARTSFIELD WAY Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify for the 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: DALLAS MARSHALL S 05/01/2006