2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2010
Secretary of State

DOCUMENT# 761320

Entity Name: SHADY LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O BEVERLY GREGORY
3335 PINE HILL TRAIL
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

C/O AL LOMAS
1029 SHADY LAKES CIRCLE
PALM BEACH GARDENS, FL 33418 US

Current Mailing Address:

4521 PGA BLVD
BOX #198
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 59-2600643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOMAS, AL
1029 SHADY LAKES CIRCLE
PALM BEACH GARDENS, FL 33418 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
Name: ATCHLEY, NANCY
Address: 5015 WHISPERING HOLLOW
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPD
Name: SIMON, DAVID
Address: 3337 PINE HILL TRL.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: TD
Name: LOMAS, ALBERT
Address: 1029 SHADY LAKES CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S
Name: BEAMER, KATHRYN
Address: 2258 QUAIL RIDGE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: AL LOMAS TD 03/03/2010

Electronic Signature of Signing Officer or Director Date