2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005696

FILED Jan 29, 2007 Secretary of State

Entity Name: HAWTHORNE AT SHADOW WOOD NEIGHBORHOOD ASSOCIATION, INC.

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

26025 CLARKSTON DRIVE BONITA SPRINGS, FL 34135

Current Mailing Address: New Mailing Address:

26025 CLARKSTON DRIVE BONITA SPRINGS, FL 34135

FEI Number: 02-0592404 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:

BONITA MANAGEMENT GROUP, INC. 26025 CLARKSTON DRIVE BONITA SPRINGS, FL 34135 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:

Title: P () Delete Title: PD (X) Change () Addition
Name: RICHARD, BOE Name: RICHARD, BOE
Address: 9017 MINDSUERT DR

Address: 9017 WINDSUEPT DR Address: 9017 WINDSUEPT DR
City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP () Delete Title: VPD (X) Change () Addition Name: ELLIOTT, JERRY Name: ELLIOTT, JERRY

Address: 9102 WINDSWEPT DR. Address: 9102 WINDSWEPT DR.
City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135

Title: S () Delete Title: SD (X) Change () Addition Name: ROSSI, CATHY Name: ROSSI, CATHY

 Name:
 ROSSI, CATHY
 Name:
 ROSSI, CATHY

 Address:
 9085 WINDSWEPT DR.
 Address:
 9085 WINDSWEPT DR.

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 BONITA SPRINGS, FL 34135

 Name:
 MORAGHON, THOMAS
 Name:
 COHEN, TED

 Address:
 9036 WINDSWEPT DR
 Address:
 9012 WINDSWEPT DR

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 BONITA SPRINGS, FL 34135

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

Name:SANTORO, RICHARDName:GROSFIELD, ELIZABETHAddress:9015 WINDSWEPT DRAddress:9077 WINDSWEPT DRCity-St-Zip:BONITA SPRINGS, FL 34135City-St-Zip:BONITA SPRINGS, FL 34135

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: RICK BOE PD 01/29/2007