

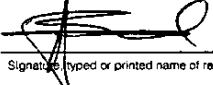
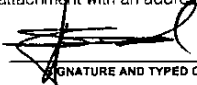


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90195 029 ****61.25

DOCUMENT # N02000001482 1. Entity Name SHADOW WOOD PRESERVE SANDALWOOD I CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 34202-4108			Mailing Address 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 34202-4108		
2. Principal Place of Business 27800 OLD 41 RD Suite, Apt. #, etc.		3. Mailing Address 27800 OLD 41 RD Suite, Apt. #, etc.		50019422 	
City & State BONITA SPRINGS, FL		City & State BONITA SPRINGS, FL		4. FEI Number 56-2321309	
Zip 34135		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPENCER, MARC I 877 EXECUTIVE CENTER DRIVE W., SUITE 205 ST. PETERSBURG, FL 33702-2472				7. Name and Address of New Registered Agent Name STERLING PROPERTY SERVICES Street Address (P.O. Box Number is Not Acceptable) 27800 OLD 41 RD City BONITA SPRINGS FL Zip Code 34135	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  ANTHONY SHEFFERD (as Agent) 4/25/06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, ALAN B 2950 IMMOKALEE ROAD #2 NAPLES, FL 34110 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KEATING, PHILIP 18520 SANDALWOOD PTE #101 FORT MYERS FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HARTZ, MICHAEL M 8430 ENTERPRISE CIRCLE BRADENTON, FL 342024108 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DL LEWIS, MARK 18530 SANDALWOOD PTE #201 FORT MYERS FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SPENCER, MARC I 877 EXECUTIVE CENTER DR. W., STE 205 ST. PETERSBURG, FL 337022472 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GRAY, DAVID 18510 SANDALWOOD PTE # 101 FORT MYERS FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITMORE, JAMES A 2950 IMMOKALEE ROAD #2 NAPLES, FL 34110 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUTCHINSON, JACK 18540 SANDALWOOD PTE #102 FORT MYERS FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERTH, JACK 18530 SANDALWOOD PTE # 101 FORT MYERS FL 33908 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  ANTHONY SHEFFERD (as Agent) 4/25/06 239-947-4552 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					