2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State
05-05-2006 90195 028 ****61.25

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1. Entity Name
SHADOW WOOD PRESERVE SANDALWOOD NEIGHBORHOOD ASSOCIATION, INC.

50019423

Principal Place of Business	Mailing Address
8430 ENTERPRISE CIRCLE SUITE 100 BRADENTON, FL 34202-4108	8430 ENTERPRISE CIRCLE SUITE 100 BRADENTON, FL 34202-4108

04252006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
27800 OLD 41 RD	27800 OLD 41 RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BONITA SPRINGS, FL	City & State: BONITA SPRINGS, FL
Zip: 34135 Country: USA	Zip: 34135 Country: USA

4. FEI Number 56-2321315 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPENCER, MARC I 877 EXECUTIVE CENTER DRIVE W., SUITE 205 ST. PETERSBURG, FL 33702-2472	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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	AS SPENCER, MARC I 877 EXECUTIVE CENTER DR. W., STE 205 ST. PETERSBURG, FL 337022472	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ED CRAWFORD 18550 SANDALWOOD PTE # 202 FORT MYERS FL 33908	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITMORE, JAMES A 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 342024108	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT/S PHIL KEATING 18520 SANDALWOOD PTE # 101 FORT MYERS FL 33908	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, ALAN B 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 342024108	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GEORGE JOHANSSEN 18560 SANDALWOOD PTE # 202 FORT MYERS FL 33908	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HARTZ, MICHAEL M 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 342024108	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORDON KRETH 18570 SANDALWOOD PTE # 202 FORT MYERS FL 33908	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARK LEWIS 18530 SANDALWOOD PTE # 201 FORT MYERS FL 33908	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #