2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State
04-21-2008 90076 018 ****61.25

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

Principal Place of Business	Mailing Address
27800 OLD 41ST RD BONITA SPRINGS, FL 34135	27800 OLD 41ST RD BONITA SPRINGS, FL 34135

01242008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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

STERLING PROPERTY SERVICES
27800 OLD 41ST RD
BONITA SPRINGS, FL 34135

7. Name and Address of New Registered Agent

Name STERLING PROPERTY SERVICES
Street Address (P.O. Box Number is Not Acceptable) 27180 BAY LANDING DR. SUITE 4
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 PROP. MGR 3/11/08
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, 2008

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	DS ZUNGOLD, RONALD 18540 SANDALWOOD POINTE #202 FORT MYERS, FL 33908	☑ Delete	DP DAVID GRAY 18510 SANDALWOOD PTE #101 FT. MYERS, FL 33908	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP KEATING, PHIL 18520 SANDALWOOD PTE #101 FORT MYERS, FL 33908	☑ Delete	DS ED KLEMPAY 18530 SANDALWOOD PTE #202 FT. MYERS, FL 33908	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT GILBERTSON, TOM 1850 SANDALWOOD POINTE #201 FORT MYERS, FL 33908	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV KRETH, GORDON 18570 SANDALWOOD PTE #202 FORT MYERS, FL 33908	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAHAM, KIM 18590 SANDALWOOD POINTE #102 FORT MYERS, FL 33908	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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 PROP. MGR. 2/13/08 239-947-4552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #