2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001485

FILED Apr 14, 2010 Secretary of State

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

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

STERLING PROPERTY SERVICES 27180 BAY LANDING DR 27180 BAY LANDING SUITE 4 SUITE 4

27180 BAY LANDING SUITE 4 SUITE 4 BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135

Current Mailing Address: New Mailing Address:

STERLING PROPERTY SERVICES 27180 BAY LANDING DR

27180 BAY LANDING SUITE 4 SUITE 4

BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135

FEI Number: 56-2321315 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:

STERLING PROPERTY SERVICES
27180 BAY LANDING DR. SUITE 4

STERLING PROPERTY SERVICES
27180 BAY LANDING DR

BONITA SPRINGS, FL 34135 US SUITE 4
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: JOHN O'GORMAN 04/14/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

Name: KRETH, GORDON

Address: 18570 SANDALWOOD POINTE, #202

City-St-Zip: FORT MYERS, FL 33908

Title: VP

Name: JOHANSSEN, GEORGE

Address: 18560 SANDALWOOD POINTE, #202

City-St-Zip: FORT MYERS, FL 33908

Title: DT

Name: GILBERTSON, TOM

Address: 18550 SANDALWOOD POINTE, #201

City-St-Zip: FORT MYERS, FL 33908

Title: DS

Name: GRAHAM, KIM

Address: 18590 SANDALWOOD POINTE, #102

City-St-Zip: FORT MYERS, FL 33908

Title:

Name: KLEMPAY, ED

Address: 18530 SANDALWOOD POINTE, #202

City-St-Zip: FORT MYERS, FL 33908

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: GORDON KRETH DP 04/14/2010