

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001557

FILED
Apr 10, 2009
Secretary of State

Entity Name: SHADOW WOOD PRESERVE BAY WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

27180 BAY LANDING DRIVE
SUITE D
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

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

Current Mailing Address:

27180 BAY LANDING DRIVE
SUITE D
BONITA SPRINGS, FL 34135 US

New Mailing Address:

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

FEI Number: 56-2321301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERING PROPERTY SRVICES
27180 BAY LANDINGS DRIVE
SUITE 4
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: SAWATZKY, DANIEL
Address: 18900 BAY WOODS LAKE DR. 101
City-St-Zip: FORT MYERS, FL 33908

Title: DV () Delete
Name: SUNDQUIST, PAUL
Address: 18920 BAY WOODS LAKE DR. #202
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: FLAVIN, JOHN
Address: 1592 BAYWOODS LAKE DR. #102
City-St-Zip: FORT MYERS, FL 33908

Title: DS () Delete
Name: JOANN, PAUWELS
Address: 7060 BAY WOODS LAKE CT. #101
City-St-Zip: FORT MYERS, FL 33908

Title: DT () Delete
Name: SORGI, JOSEPH
Address: 18911 BAYWOODS LAKE DR. #203
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL SAWATZKY

DP

04/10/2009

Electronic Signature of Signing Officer or Director

Date