2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# N02000009307

Entity Name: NORTHRIDGE AT SHADOW WOOD NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

FEI Number: 22-3888990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STERLING PROPERTY SERV.
27180 BAY LANDING DR. SUITE 4
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

STERLING PROPERTY SERV.
27180 BAY LANDING DR.
STE 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: _____ 03/16/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MARELLA, LEN
Address: 10170 NORTHRIDGE COURT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVP ( ) Delete
Name: ALLEMONE, DAVID
Address: 10031 NORTHRIDGE COURT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DST ( ) Delete
Name: VOTTA, GERALD
Address: 10041 NORTHRIDGE COURT
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change ( ) Addition
Name: ALLEMONG, DAVID
Address: 10031 NORTHRIDGE COURT
City-St-Zip: BONITA SPRINGS, FL 34135

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: LEN MARELLA DP 03/16/2009
Electronic Signature of Signing Officer or Director — Date