

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90098 024 ****61.25

DOCUMENT # N04000010711

1. Entity Name

SHIELD'S POINT PLANTATION OWNER'S
ASSOCIATION, INC.



Principal Place of Business

4032 GORDON WELLS DRIVE
MILTON FL 32583

Mailing Address

4032 GORDON WELLS DRIVE
MILTON FL 32583

2. Principal Place of Business

3909 Andrew Jackson Cir.

Suite, Apt. #, etc.

PACE FLORIDA

City & State

Zip
32571

Country
U.S.A.

3. Mailing Address

3909 Andrew Jackson Circle

Suite, Apt. #, etc.

PACE FL.

City & State

Zip
32571

Country
U.S.A.



1st MOORE

CR2E037 (10/04)

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARRIS, HARRY C
4032 GORDON WELLS DRIVE
MILTON FL 32583

7. Name and Address of New Registered Agent

Name
same

Street Address (P.O. Box Number is Not Acceptable)

3909 Andrew Jackson Circle

City
PACE

FL

Zip Code
32571

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRIS, HARRY C
4032 GORDON WELLS DRIVE
MILTON FL 32583 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRIS, LINDA
4032 GORDON WELLS DRIVE
MILTON FL 32583 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRY C. HARRIS
3909 Andrew Jackson Circle
PACE FL. 32571 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRIS, LINDA
3909 Andrew Jackson Circle
PACE, FL. 32571 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 exemption stated in Section 119.07(3)(i), 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: Linda G. Harris LINDA G. HARRIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-05 (850)626-4814

Date

Daytime Phone #