

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 16, 2007 8:00 am
Secretary of State**

04-16-2007 90064 014 ****61.25

DOCUMENT # N04000010711		
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1. Entity Name
SHIELD'S POINT PLANTATION OWNER'S ASSOCIATION,
INC.

Principal Place of Business
3909 ANDREW JACKSON CIR
PACE, FL 32571

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Mailing Address
3909 ANDREW JACKSON CIR
PACE, FL 32571

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

Country

4. FEI Number
71-0963041

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, HARRY C
3909 ANDREW JACKSON CIR
PACE, FL 32571

Name
DENNIS M. ESWINE
Street Address (P.O. Box Number is Not Acceptable)
3966 GORDON WELLS DR.
City **MILTON** Zip Code **32583**

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 **DENNIS M. ESWINE**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remitting)

4/10/07
DATE

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 D Delete
NAME HARRIS, HARRY C
STREET ADDRESS 3909 ANDREW JACKSON CIR
CITY-ST-ZIP PACE, FL 32571

TITLE PRESIDENT Change Addition
NAME DENNIS M. ESWINE (D)
STREET ADDRESS 3966 GORDON WELLS DR.
CITY-ST-ZIP MILTON, FL. 32583

TITLE D Delete
NAME HARRIS, LINDA
STREET ADDRESS 3909 ANDREW JACKSON CIR
CITY-ST-ZIP PACE, FL 32571

TITLE TREASURER Change Addition
NAME VIC R. GALLOWAY (D)
STREET ADDRESS 3947 GORDON WELLS DR.
CITY-ST-ZIP MILTON, FL. 32583

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V.P. Change Addition
NAME JOHN C. GILMORE JR. (P)
STREET ADDRESS 9105 SCENIC HWY
CITY-ST-ZIP PENSACOLA, FL. 32504

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CO-TREASURER Change Addition
NAME GREGG LOWERY (P)
STREET ADDRESS 4050 GORDON WELLS DR
CITY-ST-ZIP MILTON, FL 32583

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SECRETARY Change Addition
NAME RICHARD M. MARKEY (D)
STREET ADDRESS 2109 ST. ANDREWS DR.
CITY-ST-ZIP CANTONMENT, FL. 32533

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **DENNIS M. ESWINE**
Signature and typed or printed name of signing officer or director

Date **4/10/07** Daytime Phone # **(850) 623-2751**