

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006596

FILED
Apr 02, 2011
Secretary of State

Entity Name: SHADOW GLEN AT COLONIAL II RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O SCHOO.MANAGEMENT
9411-2 CYPRESS LAKE DR
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

C/O SCHOO MANAGEMENT
9411-2 CYPRESS LAKE DR
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 20-3063761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELLES, BOB
SCHOO MANAGEMENT, INC.
9411-2 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

GELLES, ROBERT E
SCHOO MANAGEMENT, INC.
9411-2 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 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: ROBERT E GELLES

04/02/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: OWEN, KATHY
Address: 9047 SHADOW GLEN WAY
City-St-Zip: FORT MYERS, FL 33913

Title: VP
Name: EMARD, DENIS
Address: 9070 SHADOW GLEN WAY
City-St-Zip: FORT MYERS, FL 33913

Title: S/T
Name: SUCHOR, RAY
Address: 9053 SHADOW GLEN WAY
City-St-Zip: FORT MYERS, FL 33913

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: ROBERT E GELLES

CAM

04/02/2011

Electronic Signature of Signing Officer or Director

Date