2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008125

FILED Mar 12, 2008 Secretary of State

Entity Name: LAKE SHALLOWFORD ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6150 DIAMOND CENTRE COURT 4571 COLONIAL BLVD

BUILDING 1300 SUITE 102

FT. MYERS, FL 33912 FT. MYERS, FL 33966

Current Mailing Address: New Mailing Address:

6150 DIAMOND CENTRE COURT 4571 COLONIAL BLVD

SUITE 102 **BUILDING 1300**

FT. MYERS, FL 33912 FT. MYERS, FL 33966

FEI Number: 20-8709079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALLISON, JANET E ALLISON, JANET E 6150 DIAMOND CENTRE COURT 4571 COLONIAL BLVD

BUILDING 1300 SUITE 102

FT. MYERS, FL 33912 US FT. MYERS, FL 33966 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: 03/12/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ALLISON, JANET E ALLISON, JANET E Name: Name:

Address: 6150 DIAMOND CENTRE COURT BUILDING 1300 Address: 4571 COLONIAL BLVD SUITE 102 City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33966

(X) Change () Addition Title: () Delete Title:

Name: MOORE, JAMES A Name: MOORE, JAMES A Address: 6150 DIAMOND CENTRE COURT BUILDING 1300 Address: 4571 COLONIAL BLVD SUITE 102

City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33966

Title: () Delete Title: (X) Change () Addition

THIBAUT, RANDY THIBAUT, RANDY Name: Name:

6150 DIAMOND CENTRE COURT BUILDING 1300 4571 COLONIAL BLVD SUITE 102 Address: Address:

City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33966

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: JANET E ALLISON D 03/12/2008