2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007
Secretary of State

DOCUMENT# N06000001601

Entity Name: THE SHADY GREENWAY CONSERVATION ALLIANCE, INC.

Current Principal Place of Business:

13670 HIGHWAY 475
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

13670 HIGHWAY 475
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 56-2561609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHEARER, DOUGLAS
13670 HIGHWAY 475
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ORR, PATTY
Address: 2455 SW 8TH PLACE
City-St-Zip: OCALA, FL 34476

Title: S/D ( ) Delete
Name: SHEARER, MICHELLE
Address: 2301 SE 85TH STREET
City-St-Zip: OCALA, FL 34480

Title: T ( ) Delete
Name: COOK, MIRIAM
Address: 7110 SW 27TH AVENUE
City-St-Zip: OCALA, FL 34476

Title: D ( ) Delete
Name: SHEARER, DOUGLAS
Address: 13670 HIGHWAY 475
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete
Name: HAN, KRIS
Address: 2208 SE 29TH STREET
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete
Name: WEESNER, DARLENE
Address: 655 SW 80TH STREET
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: DOUGLAS SHEARER D 05/21/2007

Electronic Signature of Signing Officer or Director — Date