

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008916

FILED  
Jul 14, 2008  
Secretary of State

**Entity Name:** SHADY CREEK PRESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3550 BUSCHWOOD PARK DRIVE, SUITE 180  
TAMPA, FL 33618

**New Principal Place of Business:**

2002 N. LOIS AVENUE  
SUITE 507  
TAMPA, FL 33607

**Current Mailing Address:**

3550 BUSCHWOOD PARK DRIVE, SUITE 180  
TAMPA, FL 33618

**New Mailing Address:**

2002 N. LOIS AVENUE  
SUITE 507  
TAMPA, FL 33607

**FEI Number:** 30-0380414      **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:**

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

COMMUNITY ASSOCIATION MANAGEMENT SERVICES  
2002 N. LOIS AVE., SUITE 507  
TAMPA, FL 33607 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MACKEY, KIMBERLEY  
Address: 3550 BUSCHWOOD PARK DRIVE, SUITE 180  
City-St-Zip: TAMPA, FL 33618

Title: VD ( ) Delete  
Name: NORGART, ANDREW  
Address: 3550 BUSCHWOOD PARK DRIVE, SUITE 180  
City-St-Zip: TAMPA, FL 33618

Title: STD ( ) Delete  
Name: MURPHY, MICHAELANN  
Address: 3550 BUSCHWOOD PARK DRIVE, SUITE 180  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MANSOUR, MAHDI  
Address: 4902 EISENHOWER BOULEVARD, SUITE 380  
City-St-Zip: TAMPA, FL 33634

Title: VP (X) Change ( ) Addition  
Name: SOUTHWARD, MIKE  
Address: 4902 EISENHOWER BOULEVARD, SUITE 380  
City-St-Zip: TAMPA, FL 33634

Title: ST (X) Change ( ) Addition  
Name: JESSKI, BOB  
Address: 4902 EISENHOWER BOULEVARD, SUITE 380  
City-St-Zip: TAMPA, FL 33634

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: MAHDI MANSOUR

P

07/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date