

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90036 011 ****61.25

DOCUMENT # N08677 1. Entity Name SHANNON LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business % MIAMI MANAGEMENT 1189 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323			Mailing Address % MIAMI MANAGEMENT 1189 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0158556	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RANDALL K. ROGER & ASSOC., PA 621 NW 53RD ST SUITE 300 BOCA RATON, FL 33487				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		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 NAME STREET ADDRESS CITY-ST-ZIP	VPD CUERVO, TAO 833 NW 132ND AVE SUNRISE, FL 33325		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CUERVO, TEO 833 NW 132 AVE. SUNRISE, FL 33325	
	☒ Delete			☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROSS, KEN 13082 NW 11TH COURT SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JACQUE DE FERRARI 1115 NW 133 AVE. SUNRISE, FL 33323	
	☒ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAGGERTY, JAMI 927 NW 132ND AVE SUNRISE, FL 33325		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROBERT NOBLES 1118 NW 133 AVE. SUNRISE, FL 33323	
	☒ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SLAICK, GERALDINE 1002 NW 132 AVE SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHARI LOPEZ 13221 NW 11 COURT SUNRISE, FL 33323	
	☒ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLAICK, DAVID 1002 NW 11TH G SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JASON WADE 1001 NW 132 AVE. SUNRISE, FL 33323	
	☒ Delete			☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Waldo S. Brown</i> W.S. Pres. 4/8/2004 954-465-0228 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					