2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State
02-14-2005 90065 034 ****61.25

DOCUMENT # N08677

1. Entity Name
SHANNON LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

50014727

Principal Place of Business	Mailing Address
% MIAMI MANAGEMENT 1189 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323	% MIAMI MANAGEMENT 1189 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323

01172005 Chg-NP CR2E037 (10/03)

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 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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, 2005

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	PD CUERVO, TED 833 NW 132 AVE. SUNRISE, FL 33325	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Teo Cuervo 1145 Sawgrass Corporate Parkway Sunrise, FL 33323	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DEFERRARI, JACQUE 1115 NW 133 AVE. SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Jacque DeFerrari 1145 Sawgrass Corporate Parkway Sunrise, FL 33323	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD NOBLES, ROBERT 1118 NW 133 AVE. SUNRISE, FL 33325	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Robert Nobles 1145 Sawgrass Corporate Parkway Sunrise, FL 33323	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LOPEZ, SHARI 13221 NW 11 COUNT SUNRISE, FL 33323	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Barbara Hill 1145 Sawgrass Corporate Parkway Sunrise, FL 33323	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WADE, JASON 1001 NW 132 AVE. SUNRISE, FL 33323	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jenny Santaniello 1145 Sawgrass Corporate Parkway Sunrise, FL 33323	☐ 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: Ronald K. Cuervo Pres. 954-846-7545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #