

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90645 044 ****61.25

DOCUMENT # N08677

1. Entity Name
SHANNON ESTATE HOMES 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**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SKRLD, INC
201 ALHAMBRA CIR
STE 1102
CORAL GABLES FL 33134**

Name **RANDALL K. ROSEN & ASSOC., P.A.**
Street Address **621 NW 53 Street**
Suite **300**
City **Boca Raton** FL **33487**

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

FILE NOW: FEE IS \$61.25

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	P ISAKSON, JOHN 890 NW 132 AVE SUNRISE FL 33323	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAO CUERVO VPD 833 NW 132 AVE. SUNRISE, FL. 33323	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ADLER, RANDI 13231 NW 11 CT SUNRISE FL 33323	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KEN ROSS TD 13082 NW 11 CT. SUNRISE FL. 33323	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TATUM, DAVIS 920 NW 132 AVENUE SUNRISE FL 33323	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JAMI HAGGERTY SD 927 NW 132 AVE. SUNRISE, FL. 33323	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SLAICK, GERALDINE 1002 NW 132 AVENUE SUNRISE FL 33323	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	GERALDINE SLAICK 1002 NW 132 AVE SUNRISE, FL 33323	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUCK, JEFF 13182 NW 11 CT. SUNRISE FL 33323	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID SLAICK D 1002 NW 11 G. 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: **MSIGNATURE REQUIRED (Gerardine Slack) as President 2-26-03**

CR2E037 (10/02)