2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2010
Secretary of State

DOCUMENT# N10900

Entity Name: SHADOW HARBOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

343 MCDONALD STREET
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

C/O RICHARD J MAGLIO
676 SMOKERISE BLVD
LONGWOOD, FL 32779 US

New Mailing Address:

343 MCDONALD ST.
APT. 202
MOUNT DORA, FL 32757 US

FEI Number: 54-1357882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLANCHARD, CLAYTON H JR.
35 E. PINEHURST BLVD.
EUSTIS, FL 32726 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: SDT
Name: MAGLIO, RICHARD J
Address: 343 MCDONALD ST. UNIT 202
City-St-Zip: MOUNT DORA, FL 32757

Title: PD
Name: KLEB, GEORGE R
Address: 343 MCDONALD ST. UNIT 103
City-St-Zip: MOUNT DORA, FL 32757

Title: D
Name: FENNEMAN, ROBERT
Address: 343 MCDONALD ST. UNIT 101
City-St-Zip: MOUNT DORA, FL 32757

Title: D
Name: KABOUREK, WILLIAM
Address: 306 SHADOW HARBOUR LN
City-St-Zip: MOUNT DORA, FL 32757

Title: D
Name: O'DONNELL, SIOBHAN
Address: 303 SHADOW HARBOUR LN.
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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 all other like empowered.

SIGNATURE: RICHARD MAGLIO SEC 03/17/2010

Electronic Signature of Signing Officer or Director Date