

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23707

FILED
Jan 13, 2012
Secretary of State

Entity Name: SHOAL RIVER HOMEOWNER'S ASSOCIATION INC.

Current Principal Place of Business:

709 SHOAL RIVER DR
CRESTVIEW, FL 32539 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 201
CRESTVIEW, FL 32536 US

New Mailing Address:

FEI Number: 59-2866818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORD, CALVIN E
709 SHOAL RIVER DRIVE
CRESTVIEW, FL 32539 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: VP
Name: GAYDOS, RICHARD
Address: 1002 CAPRI COURT
City-St-Zip: CRESTVIEW, FL 32539 US

Title: SEC
Name: LABHART, RUTH A
Address: 4690 LOVEGRASS LANE
City-St-Zip: CRESTVIEW, FL 32539 US

Title: MR
Name: SONGER, DAVID
Address: 4673 LOVEGRASS LANE
City-St-Zip: CRESTVIEW, FL 32539

Title: MR
Name: WEAVER, IAN
Address: 602 LYNN BROOK
City-St-Zip: CRESTVIEW, FL 32539 US

Title: PRES
Name: LORD, CALVIN E
Address: 709 SHOAL RIVER DR
City-St-Zip: CRESTVIEW, FL 32539 US

Title: TRES
Name: STEWART, CAROLYN
Address: 814 GAVERNIE COURT
City-St-Zip: CRESTVIEW, FL 32539

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: CAROLYN STEWART

TRES

01/13/2012

Electronic Signature of Signing Officer or Director

Date