

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000198

FILED
Jan 16, 2009
Secretary of State

Entity Name: SHEPPARD ESTATE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

1602 E LAS OLAS BLVD
FORT LAUDERDALE, FL 333012382 US

New Principal Place of Business:

2008 RIVERSIDE PLACE #2
WILTON MANORS, FL 33305 US

Current Mailing Address:

C/O R&R MANAGERS, INC
2008 RIVERSIDE PL #2
WILTON MANORS, FL 333052257 US

New Mailing Address:

2008 RIVERSIDE PLACE #2
WILTON MANORS, FL 33305 US

FEI Number: 65-0478348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBER, RICHARD N
2000 RIVERSIDE PL #5
WILTON MAORS, FL 33305 US

Name and Address of New Registered Agent:

RIDEOUT, RAYMOND L
2008 RIVERSIDE PL #2
WILTON MAORS, FL 33305 US

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: RAYMOND L RIDEOUT

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARMSTRONG, JUDITH G
Address: 1626 E. LAS OLAS BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: SD () Delete
Name: BROWN, NANCY R
Address: 10 SE 17 AVE
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: TD () Delete
Name: HIGGS, INA M
Address: 1602 E. LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAYMOND L RIDEOUT

MGR

01/16/2009

Electronic Signature of Signing Officer or Director

Date