2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000854

FILED Jan 10, 2009 Secretary of State

Entity Name: SHANNON PINES LOT OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9368 CROCUS CT 9368 CROCUS CT

FT.MEYERS, FL 33967 US FT.MYERS, FL 33967 US

Current Mailing Address: New Mailing Address:

P O BOX 605 P O BOX 605

ESTERO, FL 33928 US ESTERO, FL 33929 US

FEI Number: 65-0545618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRESNELL, BARBARA TD 9368 CROCUS CT. 9368 CROCUS CT.

FT MYERS, FL 33912 US FT MYERS, FL 33967 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: BARBARA PRESNELL 01/10/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VD (X) Change () Addition Name: BLACKER, CLARKE Name: BLACKER, CLARKE

 Address:
 9355 CROCUS CT
 Address:
 9355 CROCUS CT

 City-St-Zip:
 FT. MEYERS, FL 33967
 City-St-Zip:
 FT. MYERS, FL 33967

Title: VD () Delete Title: PD (X) Change () Addition Name: SWISSHELM, JIM Name: SWISSHELM, JIM

Name: SWISSHELM, JIM Name: SWISSHELM, JIM

Address: 9423 CROCUS CT Address: 9423 CROCUS CT

City-St-Zip: FORT MEYERS, FL 33967 City-St-Zip: FORT MYERS, FL 33967

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 PRESNELL, BARBARA
 Name:
 PRESNELL, BARBARA

 Address:
 9368 CROCUS CT.
 Address:
 9368 CROCUS CT.

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33967

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: BARBARA PRESNELL TD 01/10/2009