2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001478

FILED Apr 29, 2011 Secretary of State

Entity Name: SHADOWOOD VILLAS CONDOMINIUM ASSOCIATION, INC.

FEI Number Applied For ()

Current Principal Place of Business:

New Principal Place of Business:

C/O AMERICAN PROPERTY MGMT SERVICES

4280 TAMIAMI TRAIL EAST #204 NAPLES, FL 34112 US 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113 US

Current Mailing Address:

New Mailing Address:

C/O AMERICAN PROPERTY MGMT SERVICES

4280 TAMIAMI TRAIL EAST #204 NAPLES, FL 34112 US 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113 US

FEI Number: 65-0576425

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C/O AMERICAN PROPERTY MGMT SERVICES

C/O AMERICAN PROPERTY MGMT SERVICES

AMERICAN PROPERTY MANAGEMENT 4280 TAMIAMI TRAIL EAST

204 NAPLES, FL 34112 US AMERICAN PROPERTY MANAGEMENT 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113 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: ORLANDO MISERANDINO

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Γitle: I

Name: FRASE, KRIS

Address: 6216 SHADOWOOD CR City-St-Zip: NAPLES, FL 34112

Title: T/S

Name: BALL, VIRGINIA
Address: 6224 SHADOWOOD CR
City-St-Zip: NAPLES, FL 34112

Title: VP

 Name:
 LAUTH, MARTIN

 Address:
 6273 SHADOWOOD CR

 City-St-Zip:
 NAPLES, FL 34112

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: KRIS FRASE P 04/29/2011