

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003435

FILED  
Jan 23, 2012  
Secretary of State

**Entity Name:** SHINDLER COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1721 BLANDING BLVD  
SUITE 106-B  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

4225 NORTH PEARL ST  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

PO BOX 7414  
JACKSONVILLE, FL 32222

**New Mailing Address:**

4225 NORTH PEARL ST  
JACKSONVILLE, FL 32206

**FEI Number:** 59-3526940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMMONS, GREGG  
5639 COLDSTREAM CT  
JACKSONVILLE, FL 32222 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: P  
Name: SIMMONS, GREGG  
Address: 5639 COLDSTREAM CT  
City-St-Zip: JACKSONVILLE, FL 32222

Title: ST  
Name: BOREE, GREG  
Address: 8004 ACORN RIDGE RD  
City-St-Zip: JACKSONVILLE, FL 32256

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:** GREGG SIMMONS

P

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date