

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005973

FILED
Apr 29, 2009
Secretary of State

Entity Name: SHADY POINT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

311 CENTRE STREET
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

311 CENTRE STREET
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-3685547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JASINSKY, BRUCE A
311 CENTRE STREET
FERNANDINA BEACH, FL 32034 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: D () Delete
Name: CHARLES, TATUM
Address: 1954 SYCAMORE LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VP () Delete
Name: DAVIS, JOHN L
Address: 1 SOUTH THIRD STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: WILSON, EDWARD
Address: 1896 S. 14TH STREET, STE. 5
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: P () Delete
Name: GRAY, ROBERT
Address: PO BOX 881
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: D () Delete
Name: GRAY, JOANNA
Address: PO BOX 881
City-St-Zip: FERNANDINA BEACH, FL 32035

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:

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: ROBERT GRAY

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date