2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001290

FILED Jan 29, 2007 Secretary of State

Entity Name: SHADY BROOK RANCHES PROPERTY OWNER'S ASSOCIATION, INC.

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

4721 N ST BRIDES CIRCLE 1762 NE 17TH ST

ORLANDO, FL 32812 SUMTERVILLE, FL 33585 US

Current Mailing Address: New Mailing Address:

P.O. BOX 172 P.O. BOX 172

SUMTERVILLE, FL 33585 SUMTERVILLE, FL 33585 US

FEI Number: 59-3712308 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:

GLATT, CLEO LANGFORD, THOMAS W 4721 N ST BRIDES CIRCLE 1762 NE 17TH ST

ORLANDO, FL 32812 US SUMTERVILLE, FL 33585 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: THOMAS LANGFORD 01/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

Name: CLEO, GLATT Name: LANGFORD, THOMAS W
Address: 4721 N ST BRIDES CIRCLE Address: PO BOX 172

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: SUMTERVILLE, FL 33585

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

 Name:
 LANGFORD, TOMMY
 Name:
 JONES, CASEY

 Address:
 P O BOX 172
 Address:
 1387 NE 17TH ST

City-St-Zip: SUMTERVILLE,, FL 33585 City-St-Zip: SUMTERVILLE,, FL 33585

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

 Name:
 JONES, CASEY
 Name:

 Address:
 1387 NE 17TH ST
 Address:

 City-St-Zip:
 SUMTERVILLE,, FL 33585
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS LANGFORD PRES 01/29/2007