

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000001407

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** SHANNON LAKES OFFICE COMPLEX ASSOCIATION, INC.

**Current Principal Place of Business:**

4826 KERRY FOREST PKWY  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

4826 KERRY FOREST PKWY  
TALLAHASSEE, FL 32309

**New Mailing Address:**

**FEI Number:** 59-3681371

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATSON, JACKIE M  
4826 KERRY FOREST PKWY  
TALLAHASSEE, FL 32309 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: PD  
Name: VOLLMER, DAN  
Address: 4832 KERRY FOREST PKWY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VD  
Name: DESSI, JIM  
Address: 4824 KERRY FOREST PKWY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: STD  
Name: WATSON, JACKIE M  
Address: 4826-A KERRY FOREST PKWY  
City-St-Zip: TALLAHASSEE, FL 32308

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: JACKIE M WATSON

STD

04/01/2011

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

\_\_\_\_\_  
Date