

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758659

**Entity Name:** SHADOW WOOD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O BENCHMARK PROP. MGT.  
7932 WILES RD  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

C/O BENCHMARK PROP. MGT.  
7932 WILES RD  
CORAL SPRINGS, FL 33067

**FEI Number:** 65-0030655

**Certificate of Status Desired:** No

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

KAYE BENDER REMBAUM  
1200 PARK CENTRAL BLVD. SOUTH  
POMPANO BEACH, FL 33064 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name HEWITT, SUSAN  
Address 8500 SHADOW COURT  
City-State-Zip: CORAL SPRINGS FL 33071

Title D  
Name JUST, CHESTER  
Address 8501 SHADOW CT.  
City-State-Zip: CORAL SPRINGS FL 33071

Title T  
Name HAWKINS, JANE  
Address 8559 SHADOW COURT  
City-State-Zip: CORAL SPRINGS FL 33071

Title VP  
Name CESAR, MARGARETTE  
Address 8471 SHADOW COURT  
City-State-Zip: CORAL SPRINGS FL 33071

Title S  
Name LYTTLE, KAREN  
Address 8427 SHADOW COURT  
City-State-Zip: CORAL SPRINGS FL 33071

*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:** JANE HAWKINS

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02/14/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date