PALM BEACH GARDENS, FL 33418-3503				
Current Mai	ling Address:			
4521 PGA B BOX #198 PALM BEAC	LVD H GARDENS, FL 33418 US			
			Ormiliants of Otatus Designed	
FEI Number: 59-2600643		Certificate of Status Desired: No		
Name and F	ddress of Current Registered Agent:			
TSCHOSIK, BR 3341 PINE HILI PALM BEACH				
The above name	l entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida.	
	entity submits this statement for the purpose of changing its regis BRUCE TSCHOSIK	stered office or regis	0	/03/2023
		stered office or regis	0	/03/2023 Date
	EIECTRONIC Signature of Registered Agent	stered office or regis	0	
SIGNATURE	EIECTRONIC Signature of Registered Agent	stered office or regis	0	
SIGNATURE Officer/Dire	EIECTRONIC Signature of Registered Agent		04	
SIGNATURE Officer/Dire	EIECTONIC Signature of Registered Agent Ctor Detail : PRESIDENT	Title	04 SECRETARY	
SIGNATURE Officer/Dire Title Name	EIECTRONIC Signature of Registered Agent Ctor Detail : PRESIDENT TSCHOSIK, BRUCE 3341 PINE HILL TRAIL	Title Name	04 SECRETARY GARDNER, CHRISTINE 2251 QUAIL RIDGE N	Date
SIGNATURE Officer/Dire Title Name Address	EIECTRONIC Signature of Registered Agent Ctor Detail : PRESIDENT TSCHOSIK, BRUCE 3341 PINE HILL TRAIL	Title Name Address	04 SECRETARY GARDNER, CHRISTINE 2251 QUAIL RIDGE N	Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	E BRUCE TSCHOSIK Electronic Signature of Registered Agent Ctor Detail : PRESIDENT TSCHOSIK, BRUCE 3341 PINE HILL TRAIL PALM BEACH GARDENS FL 33418	Title Name Address	04 SECRETARY GARDNER, CHRISTINE 2251 QUAIL RIDGE N	Date
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	EIECTRONIC Signature of Registered Agent EIECTRONIC Signature of Registered Agent CTOR Detail : PRESIDENT TSCHOSIK, BRUCE 3341 PINE HILL TRAIL PALM BEACH GARDENS FL 33418 TREASURER	Title Name Address	04 SECRETARY GARDNER, CHRISTINE 2251 QUAIL RIDGE N	Date

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: AMY M AVDELLAS

Electronic Signature of Signing Officer/Director Detail

TREASURER

04/03/2023

FILED Apr 03, 2023 Secretary of State 2783774766CC

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761320

Entity Name: SHADY LAKES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4521 PGA BLVD BOX 198