2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2025
Secretary of State
5403217532CC

DOCUMENT# 761440

Entity Name: SHANGRA-LA PROPERTIES ASSOCIATION, INC.

Current Principal Place of Business:

SHANGRA-LA PROPERTIES ASSOCIATION, INC.
P.O. BOX 14
BAGDAD, FL 32530

Current Mailing Address:

SHANGRA-LA PROPERTIES ASSOCIATION, INC.
P.O. BOX 14
BAGDAD, FL 32530 US

FEI Number: 59-3169359

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENSON, DEBRA
SHANGRA-LA PROPERTIES ASSOCIATION, INC.
P.O. BOX 14
BAGDAD, FL 32530 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: DEBRA BENSON 03/11/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	BENSON , MARC	Name	KINCAID, JEFFERY
Address	11189 NORTH LAKEVIEW DRIVE	Address	11207 NORTH LAKEVIEW DRIVE
City-State-Zip:	MILTON FL 32583	City-State-Zip:	MILTON FL 32583
Title	SECRETARY, TREASURER	Title	TRUSTEE
Name	BENSON, DEBRA	Name	MURDOCK, AUDREY
Address	11189 NORTH LAKEVIEW DRIVE	Address	11210 SOUTH LAKEVEIW DRIVE
City-State-Zip:	MILTON FL 32583	City-State-Zip:	MILTON FL 32583
Title	TRUSTEE	Title	TRUSTEE
Name	LOVINS, ELVIN II	Name	SCHROEDER , WILLIAM
Address	11283 NORTH LAKEVIEW DRIVE	Address	1720 SAINT MARY'S BAY DRIVE
City-State-Zip:	MILTON FL 32583	City-State-Zip:	MILTON FL 32583

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: DEBRA BENSON SECRETARY/TREASURER 03/11/2025

Electronic Signature of Signing Officer/Director Detail — Date