

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51212

FILED
Jan 16, 2018
Secretary of State
CC8864406417

Entity Name: SHENANDOAH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7820 NW 20 LANE
GAINESVILLE, FL 32605

Current Mailing Address:

P O BOX 357026
GAINESVILLE, FL 32635 US

FEI Number: 59-3147644

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOFORTH, SAM
7820 NW 20TH LANE
GAINESVILLE, FL 32605 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 D
Name THIEMS-HEFLIN, SUZI
Address 2101 NW 77 ST
City-State-Zip: GAINESVILLE FL

Title ST
Name GOFORTH, SAM
Address 7820 NW 20 LANE
City-State-Zip: GAINESVILLE FL 32605

Title PRES
Name MITCHELL, LAURIE
Address 7832 NW 18TH LANE
City-State-Zip: GAINESVILLE FL 32605

Title VP
Name DICKINSON IV, DAN
Address 7714 NW 22ND LANE
City-State-Zip: GAINESVILLE FL 32605

Title D
Name JEFFERSON, CURTIS
Address 2205 N.W. 77 ST
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name NARDI, CHARLES F
Address 7812 NW 18TH LANE
City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR
Name SHEPHERD, DENNIS
Address 1811 NW 77TH ST
City-State-Zip: GAINESVILLE FL 32605-3165

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: SAM GOFORTH

SECRETARY TREASURER 01/16/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date