

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000049

**Entity Name:** SHANGRI-LA AT WOODMONT HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Apr 28, 2023**  
**Secretary of State**  
**7475692068CC****Current Principal Place of Business:**C/O ACCOUNTING EDGE  
8400 N UNIVERSITY DRIVE 216  
TAMARAC, FL 33321**Current Mailing Address:**C/O ACCOUNTING EDGE  
8400 N UNIVERSITY DRIVE 216  
TAMARAC, FL 33321 US**FEI Number: 65-1024481****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DAVID BAUMAN, ESQ.  
4050 W BROWARD BLVD.  
PLANTATION, FL 33317 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	VP
Name	CALDER, RICHARD
Address	C/O ACCOUNTING EDGE 8400 N UNIVERSITY DRIVE 216
City-State-Zip:	TAMARAC FL 33321
Title	PRESIDENT
Name	ORNA , NAHON
Address	C/O ACCOUNTING EDGE 8400 N UNIVERSITY DRIVE 216
City-State-Zip:	TAMARAC FL 33321

Title	DIRECTOR
Name	ADLAM, LINCEN
Address	8510 CHERRY BLOSSOM
City-State-Zip:	TAMARAC FL 33321
Title	BOARD MEMBER
Name	STOREY, MICHAEL
Address	C/O ACCOUNTING EDGE 8400 N UNIVERSITY DRIVE 216
City-State-Zip:	TAMARAC FL 33321

*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: ORNA NAHON****PRESIDENT****04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date