

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003435

**Entity Name:** SHINDLER COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4225 NORTH PEARL ST  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

4225 NORTH PEARL ST  
JACKSONVILLE, FL 32206

**FEI Number:** 59-3526940

**Certificate of Status Desired:** No

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

SIMMONS, GREGG  
4225 NORTH PEARL ST  
JACKSONVILLE, FL 32206 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 SIMMONS, GREGG  
Address 4225 NORTH PEARL ST  
City-State-Zip: JACKSONVILLE FL 32206

Title ST  
Name BOREE, GREG  
Address 8004 ACORN RIDGE RD  
City-State-Zip: JACKSONVILLE FL 32256

*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:** GREGG SIMMONS

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04/21/2018

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

\_\_\_\_\_  
Date