2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2000 8:00 am
Secretary of State
02-07-2000 90079 018 ****61.25

DOCUMENT # 713271

1. Entity Name

SHERWOOD AREA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 6255 TITUSVILLE FL 32782-6255	POST OFFICE BOX 6255 TITUSVILLE FL 32782-6255

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2092759 ☐ Applied For ☐ Not Applic.

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TARABOLETTI, MARK 4885 YEW COURT TITUSVILLE FL 32796	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	☐ Delete	TITLE	☐ Change ☐
NAME	OSBURNE, LESTER		NAME	
STREET ADDRESS	4375 LONDONTOWN RD		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL 32796		CITY-ST-ZIP	
TITLE	VD	☐ Delete	TITLE	☐ Change ☐
NAME	BRENNEMAN, HOWARD		NAME	
STREET ADDRESS	4355 LONDONTOWN RD		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL		CITY-ST-ZIP	
TITLE	SD	☐ Delete	TITLE	☐ Change ☐
NAME	BENNETT, LOUISE		NAME	
STREET ADDRESS	4690 LONGBOW		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL 32796		CITY-ST-ZIP	
TITLE	TD	☐ Delete	TITLE	☐ Change ☐
NAME	TARABOLETTI, MARK		NAME	
STREET ADDRESS	4885 YEW COURT		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL 32796		CITY-ST-ZIP	
TITLE	SD	☐ Delete	TITLE	☐ Change ☐
NAME	OSBORNE, LESTER		NAME	
STREET ADDRESS	4375 LONDONTOWN RD		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL		CITY-ST-ZIP	
TITLE	D	☐ Delete	TITLE	☐ Change ☐
NAME	STEVERWALD, VIC		NAME	
STREET ADDRESS	1974 LANCE COURT		STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark Tarabo Title Mark Tarabolett 02/01/00 (407) 269 5914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #