## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

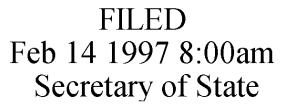
Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

N95000003778 (6)

SHERWOOD FOREST OF KISSIMMEE HOMEOWNERS ASSOCIAT

Principal Place of Business Mailing Address 500 ARCHER LANE 474 GREENWOOD LANE KISSIMMEE FL 34746 KISSIMMEE FL 34746-4900





Ų0					3. Date Incorporated or Qualified 3a. Date of Last Report	
			,		08/08/1995 02/05/1996	
· ·	Principal Place of Business 2a. Mailing Address			•	4. FEI Number Applied For	
	ARROW LN				3 59-2521868 Not Applicable	
<del></del>	ite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22 27					Fee Required	
City & State City & State				٠.	6. Election Campaign Financing \$5.00 May Be	
	SIMMEE FL	28 KISSIMME		FL	Trust Fund Contribution Added to Fees	
Zip Sur≘e	Country				8. This corporation has liability for intangible tax under s. 199,032,	
24 34746 25 29 34746 30 9. Name and Address of Current Registered Agent			10			
				81 Name	lle ·	
THOREEN, W. RICHARD				82 Street	et Address (P.O. Box Number is Not Acceptable)	
116 E. ALTAMONTE DRIVE, SUITE 210						
ALTAMONTE SPRINGS FL 32701				83		
			ŀ	84 City	85 Zip Code	
					FL   T	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE						
	Ignature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agent signature	lure required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	☐ DELETE	1.1 111	LE	<b>V.D</b>	
NAME	DOUGHTERY, RUSS		1.2 NA	ME	DOUGHTERY, RUBS	
STREET ADDRESS	109 PICKERING DRIVE		1.3 \$T	REET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL		1.4 Cf	Y-ST-ZIP	KISSIMMEE FL 34746	
TITLE	D	<b>⋈</b> DELETE	2.1 111	LE	SD Change Addition	
NAME	EDGELL, PAUL		2.2 NA	ME	HUFF, JO	
STREET ADDRESS	245 WINDSOR COURT		2.3 ST	REET ADDRESS	S 683 ARROW LN	
CITY-ST-ZIP	KISSIMMEE FL			TY-ST-ZIP	KISSIMMEE FL 34746	
TOLE	TD	☐ DELETE	3.1 111	<del></del>	<b>✓ &gt;</b> Change	
NAME	HUMPHRIES, JOANN		3.2 NA	ME	HUMPHRIES, SOANN	
STREET ADDRESS	500 ARCHER LANE			REET ADDRESS	500 ARCHER LN	
CITY-ST-ZIP	KISSIMMEE FL 34746		-	TY-ST-ZIP	KIGSIMMEE FL 34746	
TITLE	VD	DELETE	4.1 Tr		PD DS Change Addition	
NAME	MANNETTA, FRANK		1.2 N/		MANNETTA, FRANK	
STREET ADDRESS	499 ARCHER LANE			REET ADDRESS	UNG GANGE IN	
CITY-ST-ZIP	KISSIMMEE FL 34746				KISSIMMEE FL 34746	
TITLE	D NOSIMMEE PL 34740	DELETE	4.4 CIT	Y-ST-ZIP	D Change X Addition	
NAME	•	L. PILLETT	5.2 NA		CHORTS GEORGE	
	CHILDS, MELVIN A				THE SCOTT BLUD	
STREET ADDRESS	270 SCOTT BLVD.			REET ADDRESS	~   .`	
CHY-ST-ZIP	KISSIMMEE FL 34746	I DELETE		Y-ST-ZIP		
TRILE		☐ DELETE	6.1 T(1		T.D Change Addition	
NAME			6.2 NA		SARRAULT, LAWRENGE 698 ARROW LN	
STREET ADDRESS				REET ADDRESS	~	
CtTY-ST-ZIP	and the state of t	of the state of the second sec	6.4 CIT	Y-ST-ZIP	KISSIMMEE FL 34746	
information	y certify that the information supplied to indicated on this annual report or suf	with this filing does not qualify oplemental annual report is tru	or the	exemption s ccurate and	n stated in Section 119.07(3)(i). Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; that	

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