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Feb 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003778 (6)
1. Corporation Name

SHERWOOD FOREST OF KISSIMMEE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

474 GREENWOOD LANE
KISSIMMEE FL 34746

Mailing Address

500 ARCHER LANE
KISSIMMEE FL 34746-4900
US

3. Date Incorporated or Qualified
08/08/1995

3a. Date of Last Report
02/05/1996

2. Principal Place of Business

21 705 ARROW LN
Suite, Apt. #, etc.

2a. Mailing Address

26 705 ARROW LN
Suite, Apt. #, etc.

4. FEI Number
59-2521868

Applied For
Not Applicable

22 City & State

23 KISSIMMEE FL

27 City & State

28 KISSIMMEE FL

5. Certificate of Status Desired \$6.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 34746

25 Country

29 Zip 34746

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

THOREEN, W. RICHARD
116 E. ALTAMONTE DRIVE, SUITE 210
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE VD DOUGHTERY, RUSS
1.2 NAME DOUGHTERY, RUSS
1.3 STREET ADDRESS 109 PICKERING DRIVE
1.4 CITY-ST-ZIP KISSIMMEE FL
2.1 TITLE D EDGELL, PAUL
2.2 NAME EDGELL, PAUL
2.3 STREET ADDRESS 245 WINDSOR COURT
2.4 CITY-ST-ZIP KISSIMMEE FL
3.1 TITLE TD HUMPHRIES, JOANN
3.2 NAME HUMPHRIES, JOANN
3.3 STREET ADDRESS 500 ARCHER LANE
3.4 CITY-ST-ZIP KISSIMMEE FL 34746
4.1 TITLE VD MANNETTA, FRANK
4.2 NAME MANNETTA, FRANK
4.3 STREET ADDRESS 499 ARCHER LANE
4.4 CITY-ST-ZIP KISSIMMEE FL 34746
5.1 TITLE D CHILDS, MELVIN A
5.2 NAME CHILDS, MELVIN A
5.3 STREET ADDRESS 270 SCOTT BLVD.
5.4 CITY-ST-ZIP KISSIMMEE FL 34746
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE VD DOUGHTERY, RUSS Change Addition
1.2 NAME DOUGHTERY, RUSS
1.3 STREET ADDRESS 79 PICKERING DR
1.4 CITY-ST-ZIP KISSIMMEE FL 34746
2.1 TITLE SD HUFF, JO Change Addition
2.2 NAME HUFF, JO
2.3 STREET ADDRESS 683 ARROW LN
2.4 CITY-ST-ZIP KISSIMMEE FL 34746
3.1 TITLE VD HUMPHRIES, JOANN Change Addition
3.2 NAME HUMPHRIES, JOANN
3.3 STREET ADDRESS 500 ARCHER LN
3.4 CITY-ST-ZIP KISSIMMEE FL 34746
4.1 TITLE PD MANNETTA, FRANK Change Addition
4.2 NAME MANNETTA, FRANK
4.3 STREET ADDRESS 499 ARCHER LN
4.4 CITY-ST-ZIP KISSIMMEE FL 34746
5.1 TITLE D SHORTS, GEORGE Change Addition
5.2 NAME SHORTS, GEORGE
5.3 STREET ADDRESS 141 SCOTT BLVD
5.4 CITY-ST-ZIP KISSIMMEE FL 34746
6.1 TITLE TD SARRAULT, LAWRENCE Change Addition
6.2 NAME SARRAULT, LAWRENCE
6.3 STREET ADDRESS 698 ARROW LN
6.4 CITY-ST-ZIP KISSIMMEE FL 34746

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lawrence Sarrault *LAWRENCE SARRAULT* 2/11/97 (407) 396-1831
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0070064

CR2E037 (9/96)