## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008534

**Entity Name: LEGACY AT SHERWOOD FOREST HOMEOWNERS** 

ASSOCIATION, INC.

**FILED** Mar 30, 2017 **Secretary of State** CC0411504219

## **Current Principal Place of Business:**

C/O CREST MANAGEMENT GROUP, INC. 6413 CONGRESS AVENUE - SUITE 100 BOCA RATON, FL 33487

## **Current Mailing Address:**

C/O CREST MANAGEMENT GROUP, INC. 6413 CONGRESS AVENUE - SUITE 100 BOCA RATON, FL 33487 US

FEI Number: 13-4252600 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

**CREST MANAGEMENT GROUP** 6413 CONGRESS AVENUE 100 BOCA RATON, FL, FL 33487 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:

Officer/Director Detail:

Title Title SECRETARY, TREASURER

ASSERAF, ALAN V ANNACONE, DONNA Name Name

Address 6413 CONGRESS AVENUE Address C/O CREST MANAGEMENT GROUP,

> SUITE 100 INC.

6413 CONGRESS AVENUE - SUITE BOCA RATON FL 33487 City-State-Zip: 100

City-State-Zip: **BOCA RATON FL 33487** Title **DIRECTOR** 

SAFERN, STEVE Name Title **DIRECTOR** 

6413 CONGRESS AVENUE Address Name LEAVITT, ARIELLE

SUITE 100

6413 CONGRESS AVENUE Address City-State-Zip: **BOCA RATON FL 33487** 

SUITE 100

City-State-Zip: **BOCA RATON FL 33487** 

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.

03/30/2017 SIGNATURE: ALAN ASSERAF PRESIDENT

Date