

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007866

FILED
Jan 21, 2013
Secretary of State
CC7672966791

Entity Name: SHERWOOD AT THE CROSSROADS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD. SUITE 200
FORT MYERS, FL 33919

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT
6719 WINKLER RD SUITE 200
FORT MYERS, FL 33919 US

FEI Number: 04-3820386

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD
SUITE 200
FORT MYERS, FL 33919 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 PD
Name BALAN, FIDEL
Address 8300 SILVER BIRCH WAY
City-State-Zip: LEHIGH ACRES FL 33971

Title VP
Name ROSENGARD, PAMELA
Address 8233 SILVER BIRCH WAY
City-State-Zip: LEHIGH ACRES FL 33971

Title TD
Name CLONINGER-PROSSER, KATRINA
Address 11116 RIVER TRENT CT
City-State-Zip: LEHIGH ACRES FL 33971

Title SD
Name ZAPIOLA SALVADORES, MARIELA
Address 8339 SILVER BIRCH WAY
City-State-Zip: LEHIGH ACRES FL 33971

Title D
Name KOZAK, MATTHEW
Address 8138 SILVER BIRCH WAY
City-State-Zip: LEHIGH ACRES FL 33971

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: KATRINA CLONINGER-PROSSER

TREASURER

01/21/2013

Electronic Signature of Signing Officer/Director Detail

Date