

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003778

FILED
Jan 26, 2014
Secretary of State
CC6212107961

Entity Name: SHERWOOD FOREST OF KISSIMMEE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

705 ARROW LN
KISSIMMEE
KISSIMMEE, FL 34746

Current Mailing Address:

705 ARROW LN
KISSIMMEE, FL 34746 US

FEI Number: 59-2521868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE JAY COLLING & ASSOCIATES. P.A.
529 VERSAILLES DRIVE
SUITE 103
MAITLAND, FL 32751 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: LEE JAY COLLING

01/26/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name FISHER, ELVIN
Address 409 FOREST LN
City-State-Zip: KISSIMMEE FL 34746

Title EXVP
Name STEINWANDEL, RICHARD
Address 545 SQUIRE LANE
City-State-Zip: KISSIMMEE FL 34746

Title SEC
Name CONLEY, EDITH
Address 562 SQUIRE LANE
City-State-Zip: KISSIMMEE FL 34746

Title TREA
Name CLAPPER, MARY JO
Address 759 FOREST LANE
City-State-Zip: KISSIMMEE FL 34746

Title VP
Name TACKMAN, SUE
Address 666 ARROW LN
City-State-Zip: KISSIMMEE FL 34746

Title D
Name MILLER, RAYMOND
Address 538 SQUIRE LANE
City-State-Zip: KISSIMMEE FL 34746

Title DIRECTOR
Name SWICK, SIGRID
Address 710 FOREST LN
City-State-Zip: KISSIMMEE FL 34746

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: MARY JO CLAPPER

TREASURER

01/26/2014

Electronic Signature of Signing Officer/Director Detail

Date