## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#758002** 

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

WEST PALM BEACH, FL 33415

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FILED Apr 14, 2009 Secretary of State

Entity Name: SHERWOOD VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2400 CENTREPARK W DR 175 WEST PALM BEACH, FL 33409 **New Mailing Address: Current Mailing Address:** 2400 CENTREPARK W DR WEST PALM BEACH, FL 33409 FEI Number: 59-2159400 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEE, ELIZABETH GELFAND & ARPE, P.A. 2400 CENTREPARK W DR 1555 PALM BEACH LAKES BLVD., 1220 WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33401 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: GELFAND & ARPE 04/14/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition CULLEH, BETTE LUCIO, JUANITA Name: Name: 5894 LONG BOW LN SUITE 8 Address: 5954 LONG BOW LN SUITE #8 Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: ( ) Delete Title: (X) Change ( ) Addition DOMESHICO, JEANNE Name: RODRIQUEZ, MARINA Name: Address: 5894 LONG BOW LN SUITE 9 Address: 5924 LONG BOW LN SUITE #8 City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: (X) Change ( ) Addition GRISWOLD, KEVIN WERNER, DARLENE Name: Name: 5954 LONG BOW LN SUITE 1 5924 LONG BOW LN SUITE #5 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: PD ( ) Delete Title: (X) Change ( ) Addition Name: ALEXANDER, VANCE Name: HENRY, JASON 5954 LONGROW LANO UNIT 2 5894 LONG BOW LANE UNIT #2 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

WEST PALM BEACH, FL 33415

WEST PALM BEACH, FL 33415

5924 LONG BOW LANE, #7

5955 LONGBOW LANE, #8 WEST PALM BEACH, FL 33415

VERANO, ROSA

CHAVEZ, DORA

( ) Change (X) Addition

( ) Change (X) Addition

SIGNATURE: JUANITA LUCIO P 04/14/2009

above, or on an attachment with an address, with all other like empowered.