

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760252

FILED  
Feb 02, 2011  
Secretary of State

**Entity Name:** SHURWOOD GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

250 SE FOUR WINDS DR  
STUART, FL 34996 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 111  
JENSEN BEACH, FL 34958 US

**New Mailing Address:**

FEI Number: 59-2216664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORNETT, JANE L ESQ.  
CORNETT, GOOGE & ASSOCIATES, P.A.  
401 E. OSCEOLA ST 1ST FL  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: LYNN, ROBERT  
Address: 111 SANTIAGO DR # 103  
City-St-Zip: JUPITER, FL 33458 US

Title: PD  
Name: STAMM, ALAN  
Address: 250 SE FOUR WINDS DRIVE, #105  
City-St-Zip: STUART, FL 34996 US

Title: D  
Name: BARAN, PATRICIA  
Address: 250 SE FOUR WINGS DR., #104  
City-St-Zip: STUART, FL 34996 US

Title: SD  
Name: JAMES, MARGE  
Address: 250 SE FOUR WINDS DR # 204  
City-St-Zip: STUART, FL 34996 US

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: ALAN STAMM

PD

02/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date