

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 765762

FILED  
Jan 17, 2011  
Secretary of State

**Entity Name:** HOMEOWNERS OF SHERWOOD FOREST, INC.

**Current Principal Place of Business:**

2197 KINGS CROSS  
TITUSVILLE, FL 32796 BR

**New Principal Place of Business:**

2108 KINGS CROSS  
TITUSVILLE, FL 32796 BR

**Current Mailing Address:**

P O BOX 585  
MIMS, FL 327547585

**New Mailing Address:**

P O BOX 585  
MIMS, FL 32754

FEI Number: 59-2774939

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WARRO, ANGELA V  
2197 KINGS CROSS  
TITUSVILLE, FL 32796 US

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

CAPOZZI, LAURA M  
2108 KINGS CROSS  
TITUSVILLE, FL 32796 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: L M CAPOZZI

01/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CAPOZZI, LAURA M  
Address: 2108 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

Title: VD  
Name: HIGDON, RUSSELL P  
Address: 2131 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

Title: VD  
Name: TAYLOR, BERNARD  
Address: 2141 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

Title: SD  
Name: MARSH, KATHRYN D  
Address: 2148 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

Title: TD  
Name: ROVILLO, RICHARD  
Address: 2139 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

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: KATHRYN D MARSH

SD

01/17/2011

Electronic Signature of Signing Officer or Director

Date