


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N01839</b> 1. Entity Name SHERWOOD HOMEOWNERS' ASSOCIATION, INC.		
Principal Place of Business 1312 W. SUGARLAND HWY CLEWISTON, FL 33440		Mailing Address 1312 W. SUGARLAND HWY CLEWISTON, FL 33440
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  RUMFELT, ALDAN A 1017 PONCE DE LEON AVE CLEWISTON, FL 33440		<b>DO NOT WRITE IN THIS SPACE</b>
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		U000000791522 01/23/08-80078-017 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUMFELT, ALDAN A 1017 PONCE DE LEON AVE CLEWISTON, FL 33440	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STANTON, MATTHEW R 109 RIDGEWOOD AVE CLEWISTON, FL 33440	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.		
SIGNATURE: <u>Matthew R. Stanton</u> 1/17/08 (863) 983-8106 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		