

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000109

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: SHERWOOD VI, INC.

## Current Principal Place of Business:

6700 LONE OAK BLVD  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

6700 LONE OAK BLVD  
NAPLES, FL 34109

## New Mailing Address:

FEI Number: 20-0690326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUARDIAN PROPERTY MANAGEMENT  
6700 LONE OAK BLVD  
NAPLES, FL 34109 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: P ( ) Delete  
Name: BOUQUIN, BETH  
Address: 416 VALERIE WAY, #202  
City-St-Zip: NAPLES, FL 34104

Title: VP ( ) Delete  
Name: PAWLIKOWSKY, DAVID J  
Address: 422 ROBIN HOOD CIRCLE, #104  
City-St-Zip: NAPLES, FL 34104

Title: VP ( ) Delete  
Name: MCDONOUGH, COLEY  
Address: 431 VALERIE WAY, #203  
City-St-Zip: NAPLES, FL 34104

Title: T ( ) Delete  
Name: REESE, MICHAEL  
Address: 432 VALERIE WAY, #201  
City-St-Zip: NAPLES, FL 34104

Title: D (X) Delete  
Name: SHELDON, RANDY  
Address: 422 VALERIE WAY, #204  
City-St-Zip: NAPLES, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: MCDONOUGH, COLEY  
Address: 431 VALERIE WAY, #203  
City-St-Zip: NAPLES, FL 34104

Title: T (X) Change ( ) Addition  
Name: REESE, MICHAEL  
Address: 432 VALERIE WAY, #201  
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change ( ) Addition  
Name: SHELDON, RANDY  
Address: 422 VALERIE WAY, #204  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: BYRON ROSS

MGR

04/09/2009

Electronic Signature of Signing Officer or Director

Date