2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2012
Secretary of State

DOCUMENT# N93000005588

Entity Name: SHERIDAN WOODS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

620 SHERIDAN WOODS DR.
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

700 SHERIDAN WOODS DR
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 59-3223671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALLOWELL, BRUCE J
620 SHERIDAN WOODS DR.
WEST MELBOURNE, FL 32904 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: SEC
Name: SIXTO, LINDA
Address: 995 TALL TREE COURT
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D
Name: VITAL, DAN
Address: 663 SHERIDAN WOODS DR.
City-St-Zip: WEST MELBOURNE, FL 32904

Title: PD
Name: ALIBERTI, NUNZIO
Address: 698 SHERIDAN WOODS DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: TD
Name: HALLOWELL, BRUCE
Address: 620 SHERIDAN WOODS DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D
Name: TILFORD, PHYLLIS
Address: 617 SHERIDAN WOODS DR.
City-St-Zip: WEST MELBOURNE, FL 32904

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: BRUCE HALLOWELL TD 01/23/2012

Electronic Signature of Signing Officer or Director — Date