

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003852 (9)

1. Corporation Name

SHERWOOD I, INC.



Principal Place of Business

6660 BERNWOOD FARMS RD
NAPLES FL 33999

Mailing Address

6660 BERNWOOD FARMS RD
NAPLES FL 33999

3. Date Incorporated or Qualified
08/14/1995

3a. Date of Last Report

2. Principal Place of Business

21 10100 Valewood Dr.

Suite, Apt. #, etc.

2a. Mailing Address

26 10100 Valewood Dr.

Suite, Apt. #, etc.

4. FEI Number

59-3335192

☒ Applied For
☐ Not Applicable

22 City & State

23 NAPLES, FL

24 Zip

33999

25 Country

USA

27 City & State

28 NAPLES, FL

29 Zip

33999

30 Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BRUGGER, CAROL R
600 5TH AVE S
SUITE 207
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME HARDY, ROBERT P
STREET ADDRESS 6660 BERNWOOD FARMS RD
CITY-ST-ZIP NAPLES FL 33999

TITLE ☒ DELETE

NAME SHEVLIN, ROBERT E JR.
STREET ADDRESS 6660 BERNWOOD FARMS RD
CITY-ST-ZIP NAPLES FL 33999

TITLE ☒ DELETE

NAME RUSSELL, DIANE
STREET ADDRESS 6660 BERNWOOD FARMS RD
CITY-ST-ZIP NAPLES FL 33999

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

10100 Valewood Dr.
Naples, FL 33999

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

D
RENEE TOLSON
10100 Valewood Dr.
Naples, FL 33999

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

D
Gallant, Marion
10100 Valewood Dr.
Naples, FL 33999

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marion E. Gallant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96

Date

(941) 495-6067

Daytime Phone #

CR2E037 (12/95)