

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006511

FILED  
Feb 16, 2012  
Secretary of State

**Entity Name:** SHEFFIELD VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NEWELL PROPERTY MANAGEMENT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NEWELL PROPERTY MANAGEMENT  
5435 JAEGER ROAD #4  
NAPLES, FL 34109 US

**New Mailing Address:**

**FEI Number:** 59-3502204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWELL, WILLIAM A  
5435 JAEGER ROAD #4  
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: PD  
Name: MCMULLIN, BUD  
Address: 4280 KENSINGTON HIGH STREET  
City-St-Zip: NAPLES, FL 34105

Title: STD  
Name: ZAMBOLDI, ROBERT  
Address: 4232 KENSINGTON HIGH STREET  
City-St-Zip: NAPLES, FL 34105

Title: VD  
Name: NELSON, WAYNE  
Address: 4056 KENSINGTON HIGH STREET  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: SEGALLA, THOMAS  
Address: 4272 KENSINGTON HIGH STREET  
City-St-Zip: NAPLES, FL 34105

Title: VD  
Name: BERMAN, ROBERT  
Address: 4080 KENSINGTON HIGH STREET  
City-St-Zip: NAPLES, FL 34105

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: BUD MCMULLIN

PD

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date