

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90458 007 ****61.25

DOCUMENT # N99000007659

1. Entity Name
SHERWOOD IV, INC.



Principal Place of Business
**745 12TH AVENUE SOUTH
SUITE AA
NAPLES FL 34102**

Mailing Address
**745 12TH AVENUE SOUTH
SUITE AA
NAPLES FL 34102**

11002204



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Robin Hood Circle

3. Mailing Address
Suite, Apt. #, etc.

City & State
Naples, FL

City & State

4. FEI Number **65-0991710**

Applied For
Not Applicable

Zip **34104** Country **USA**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOORE PROPERTY MANAGMENT
745 12TH AVENUE, SUITE AA
NAPLES FL 34102**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☒ Delete
NAME **HARDY, ROBERT P**
STREET ADDRESS **4500 EXECUTIVE DRIVE STE 300**
CITY-ST-ZIP **NAPLES FL 34110**

TITLE **D** ☐ Change ☒ Addition
NAME **Coleman McDonough**
STREET ADDRESS **450 Robin Hood Circle #102**
CITY-ST-ZIP **Naples, FL 34104**

TITLE **TSD** ☒ Delete
NAME **WHITE, KATHY**
STREET ADDRESS **3096 TAMiami TRAIL NORTH**
CITY-ST-ZIP **NAPLES FL 34103**

TITLE **D** ☐ Change ☒ Addition
NAME **Earl White**
STREET ADDRESS **440 Robin Hood Circle #102**
CITY-ST-ZIP **Naples, FL 34104**

TITLE **VD** ☒ Delete
NAME **GODE, LARRY**
STREET ADDRESS **4500 EXECUTIVE DRIVE STE 300**
CITY-ST-ZIP **NAPLES FL 34110**

TITLE **D** ☐ Change ☒ Addition
NAME **Tish Drake**
STREET ADDRESS **470 Robin Hood Circle #102**
CITY-ST-ZIP **Naples, FL 34104**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Kenneth Teebagy**
STREET ADDRESS **500 Robin Hood Circle #102**
CITY-ST-ZIP **Naples, FL 34104**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Norman Gilvey**
STREET ADDRESS **510 Robin Hood Circle #102**
CITY-ST-ZIP **Naples, FL 34104**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/16/03 739 2625051

CR2E037 (10/02)