

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750880

Entity Name: SHERWOOD FOREST OWNERS ASSOCIATION OF SARASOTA COUNTY, INC.**FILED**
Jan 14, 2021
Secretary of State
5687131746CC**Current Principal Place of Business:**4411 BEE RIDGE ROAD #238
SARASOTA, FL 34233-2514**Current Mailing Address:**4411 BEE RIDGE ROAD #238
SARASOTA, FL 34233-2514 US**FEI Number: 59-1972505****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**BLACKMAN, DAVID A
4774 LITTLE JOHN TRAIL
SARASOTA, FL 34232 US*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**Officer/Director Detail :**Title PRES
Name CROMWELL, DAVID
Address 4782 MAID MARION LANE
City-State-Zip: SARASOTA FL 34232Title VP
Name LEGLER, KENNEDY
Address 4536 ROBIN HOOD TRAIL
City-State-Zip: SARASOTA FL 34232Title ASSISTANT TREASURER
Name BLACKMAN, DAVID A
Address 4774 LITTLE JOHN TRAIL
City-State-Zip: SARASOTA FL 34232Title VP
Name SARSOZO, TIA
Address 4431 ROBIN HOOD TRAIL
City-State-Zip: SARASOTA FL 34232Title SECR
Name PANICHELLO, DANA
Address 4520 ROBIN HOOD TRAIL
City-State-Zip: SARASOTA FL 34232Title TREASURER
Name KLINGER, SHAWN
Address 4438 FRIAR TUCK LANE
City-State-Zip: SARASOTA FL 34232

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: DAVID BLACKMAN**ASST. TREASURER****01/14/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date