2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001433

Apr 27, 2009 Secretary of State

Entity Name: STONEYBROOK AT HERITAGE HARBOUR COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7515 GRAND HARBOUR PARKWAY C/O HH MANAGEMENT SERVICES BRADENTON, FL 34212

8007 34TH AVENUE EAST BRADENTON, FL 34211

Current Mailing Address: New Mailing Address:

C/O HH MANAGEMENT SERVICES 4654 SR 64 EAST

8007 34TH AVENUE EAST #331 BRADENTON, FL 34208 BRADENTON, FL 34211

FEI Number: 65-1059004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DENNIS, COLLETTI K JR. DENNIS, COLLETTI K JR. 7515 GRAND HARBOUR PARKWAY C/O HH MANAGEMENT SERVICES

BRADENTON, FL 34212 8007 34TH AVENUE EAST BRADENTON, FL 34211 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: 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SQUITERI, TONY SQUITERI, TONY Name: Name:

551 N. CATLEMAN RD, STE 200 Address: 10481 BEN C. PRATT, SIX MILE CYPRESS PKWY Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: FORT MYERS, FL 33966

Title: () Delete Title: (X) Change () Addition MCMURRAY, DARIN Name: MCMURRAY, DARIN Name:

Address: 551 N. CATTLEMAN RD. STE 200 Address: 10481 BEN C. PRATT. SIX MILE CYPRESS PKWY

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: FORT MYERS, FL 33966

Title: TSD () Delete Title: TSD (X) Change () Addition

BURDETT, ANTHONY J Name: BURDETT, ANTHONY J Name:

551 N. CATTLEMAN RD, STE 200 10481 BEN C. PRATT, SIX MILE CYPRESS PKWY Address: Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: FORT MYERS, FL 33966

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DENNIS K COLLETTI RΑ 04/27/2009