


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90036 017 ****61.25

DOCUMENT # N25795
 1. Entity Name
STERLING MANORS OWNERS ASSOCIATION, INC.



Principal Place of Business
% GREENACRE PROPERTIES
4131 GUNN HIGHWAY
TAMPA, FL 33618

Mailing Address
% GREENACRE PROPERTIES
4131 GUNN HIGHWAY
TAMPA, FL 33618

40045610



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

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

01072008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
59-2887843

Applied For
 Not Applicable

City & State

Zip Country 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

TANKEL, ROBERT L PA
1072 MAIN STREET
STE D
DUNEDIN, FL 34698

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

Filing Fee is \$61.25
Due by May 1, 2008

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 Delete
 NAME **P CONNELL, STEPHEN**
 STREET ADDRESS **5008 STERLING MANOR DR**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition
 NAME **D**
 STREET ADDRESS **Armstrong, Ave**
16004 Gatwick Court
Tampa, FL 33647

TITLE Delete
 NAME **D KIRSCHMANN, JACK**
 STREET ADDRESS **5010 STERLING MANOR DR**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition
 NAME **MEG COLLINS**
 STREET ADDRESS **16016 GATWICK CT.**
Tampa, FL 33647

TITLE Delete
 NAME **D GARTH, COURTNEY**
 STREET ADDRESS **10000 WESTERHAM**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition

TITLE Delete
 NAME **D PATNAUDE, SOPHIE V**
 STREET ADDRESS **5135 STERLING MANOR DR.**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition

TITLE Delete
 NAME **BVP HICKOK, MICHAEL**
 STREET ADDRESS **5119 STERLING MANOR DR**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition

TITLE Delete
 NAME **D LOWE, NICKI**
 STREET ADDRESS **5114 STERLING MANOR DR**
 CITY-ST-ZIP **TAMPA, FL 33647**

TITLE Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]* **3/6/08 927-4251**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #