

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35575

FILED  
Mar 27, 2008  
Secretary of State

Entity Name: STONECREST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044 US

**New Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

**Current Mailing Address:**

2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044 US

**New Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

FEI Number: 59-3171732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HART, JAMES W JR.  
2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US

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

HART, JAMES W JR.  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 327795044 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: JAMES W HART JR

03/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROBERTSON, L. HALL JR.  
Address: 11053 SE 174TH LP  
City-St-Zip: SUMMERFIELD, FL 34491

Title: STD ( ) Delete  
Name: MAGUIRE, RAYMOND  
Address: 26 S. PENNSYLVANIA AVE., STE 200  
City-St-Zip: ATLANTIC CITY, NJ 08401

Title: VD ( ) Delete  
Name: HENSON, STEVE  
Address: 2428 BOARDWALK PLACE DR  
City-St-Zip: ST LOUIS, MO 63129

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

Title: PD (X) Change ( ) Addition  
Name: ROBERTSON, L H  
Address: 11053 SE 174TH LP  
City-St-Zip: SUMMERFIELD, FL 34491

Title: VPD (X) Change ( ) Addition  
Name: MAGUIRE, RAYMOND  
Address: 26 S PENNSYLVANIA AVE STE 200  
City-St-Zip: ATLANTIC CITY, NJ 08401

Title: STD (X) Change ( ) Addition  
Name: HENSON, STEVE  
Address: 2428 BOARDWALK PLACE  
City-St-Zip: ST LOUIS, MO 63129

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: L HALL ROBERTSTON

PD

03/27/2008

Electronic Signature of Signing Officer or Director

Date