

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35575

FILED
Jan 09, 2009
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

Current 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 ()

New Principal Place of Business:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822 US

New Mailing Address:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822 US

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FURLOW, REBECCA
5955 T. G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822 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: REBECCA FURLOW

01/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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. H. ROBERTSON

PD

01/09/2009

Electronic Signature of Signing Officer or Director

Date