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FILED
May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003344 (7)

1. Corporation Name
STONEBROOK TERRACE ASSOCIATION I, INC.



Principal Place of Business Mailing Address

CONDOMINIUM MANAGEMENT INC.
1801 GLENGARY STREET
SARASOTA FL 34232

CONDOMINIUM MANAGEMENT INC.
1801 GLENGARY STREET
SARASOTA FL 34232

3. Date Incorporated or Qualified
07/10/1995

4. FEI Number
65-0605363

Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 25 Country 28 Zip 29 Country

24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

CONDOMINIUM MANAGEMENT INC
1801 GLENGARY ST
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	GARDNER, JOSEPH M MR	
STREET ADDRESS	8755 OLDE HICKORY AVE, UNIT 7304	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ANDERSON, WILLARD M	
STREET ADDRESS	8755 OLDE HICKORY AVE, UNIT 7301	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAYL, THOMAS C MR	
STREET ADDRESS	8755 OLDE HICKORY AVE, UNIT 7105	
CITY-ST-ZIP	SARASOTA FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	DUKOR, MR PAUL	
STREET ADDRESS	4900 CENT. SARASOTA PKWY.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	ORR, BETTY ANN M	
STREET ADDRESS	8755 OLDE HICKORY AVE, UNIT 7208	
CITY-ST-ZIP	SARASOTA FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	CLARK, RICHARD P	
STREET ADDRESS	1801 GLENGARY ST.	
CITY-ST-ZIP	SARASOTA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

SEE ATTACHED

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Clark 4/25/98 P. Richard Clark 941-921-5393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0063134

CR2E037 (10/97)

ST1**Stoneybrook Terrace Association I, Inc.**

Page: 1

Manager	Tm A	Local Address	Date Printed:	3/24/98	Code
P/D		Mr. Thomas C. Mayl 8755 Olde Hickory Avenue / Unit #7105 Sarasota, FL 34238			10
V/D		Mr. Joseph M. Gardner / 8755 Olde Hickory Avenue Unit #7304 Sarasota, FL 34238			12
S/T/D		Ms. Jean Hadden 8755 Olde Hickory Ave. #7104 Sarasota, FL 34238			35
D		Mr. Alan Hernandez / 8755 Olde Hickory Ave. #7206 Sarasota, FL 34238			40
D		Mr. Willard Anderson 8755 Olde Hickory Avenue Unit #7301 Sarasota, FL 34238			40
AS		Mr. P. Richard Clark / 1801 Glengary St. Sarasota, FL 34231			50
AT		Mr. Paul R. Clark, Jr. 1801 Glengary St. Sarasota FL 34231			55