

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006045

FILED
Jan 10, 2012
Secretary of State

Entity Name: STONEGATE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6201 NW 123RD PLACE
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

6201 NW 123RD PLACE
GAINESVILLE, FL 32653 US

New Mailing Address:

FEI Number: 59-3423665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATION MANAGEMENT SOLUTIONS, LLC
6201 NW 123RD PLACE
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: KNOWLES, JACQUI
Address: 13739 NW 91ST PLACE
City-St-Zip: ALACHUA, FL 32615 US

Title: VP
Name: NOFFSINGER, WILLIAM B
Address: 13271 NW 93RD LANE
City-St-Zip: ALACHUA, FL 32615 US

Title: ST
Name: MCRAE, INGER
Address: 13633 NW 91ST PLACE
City-St-Zip: ALACHUA, FL 32615 US

Title: D
Name: EVERETT, RANDY
Address: 9944 NW 136TH DRIVE
City-St-Zip: ALACHUA, FL 32615 US

Title: D
Name: DABNEY, DREW
Address: 9913 NW 136TH DRIVE
City-St-Zip: ALACHUA, FL 32615 US

I hereby 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 all other like empowered.

SIGNATURE: JACQUI KNOWLES

PRES

01/10/2012

Electronic Signature of Signing Officer or Director

Date