

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 16, 2009
Secretary of State**

DOCUMENT# N97000002827

Entity Name: TERRACE I AT STONEYBROOK ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O NEWELL PROPERTY MGMT.
5435 JAEGER RD., #4
NAPLES, FL 34109 US

Current Mailing Address:

New Mailing Address:

C/O NEWELL PROPERTY MGMT.
5435 JAEGER RD., #4
NAPLES, FL 34109 US

FEI Number: 65-0758846 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NEWELL, WILLIAM
5435 JAEGER ROAD, #4
NAPLES, FL 34109 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FREIBERG, PAUL
Address: 7505 STONEYBROOK DR #734
City-St-Zip: NAPLES, FL 34112

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

Title: VD () Delete
Name: KING, JOHN
Address: 7505 STONEYBROOK DRIVE #723
City-St-Zip: NAPLES, FL 34112

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

Title: STD () Delete
Name: LYNCH, WILLIAM
Address: 7505 STONEYBROOK DRIVE #718
City-St-Zip: NAPLES, FL 34112

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: PAUL FREIBERG

PD

01/16/2009

Electronic Signature of Signing Officer or Director

_____ Date