

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005324

FILED
Mar 26, 2009
Secretary of State

Entity Name: BRAEBURN AT STONEBRIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0786773 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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: SD () Delete
Name: GANJAMIE, CHARLES
Address: 1645 WINDING OAKS WAY #202
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: BLAKE, MICHAEL
Address: 1615 WINDING OAKS WAY #202
City-St-Zip: NAPLES, FL 34109

Title: PD () Delete
Name: WERLING, BILL
Address: 1665 WINDING OAKS WAY #103
City-St-Zip: NAPLES, FL 34109

Title: TD () Delete
Name: ZULALIAN, JACK
Address: 1605 WINDING OAKS WAY #102
City-St-Zip: NAPLES, FL 34109

Title: VPD () Delete
Name: POUND, JAMES
Address: 1595 WINDING OAKS WAY #103
City-St-Zip: NAPLES, FL 34109

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:

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: BILL WERLING

PD

03/26/2009

Electronic Signature of Signing Officer or Director

Date