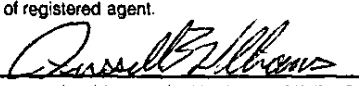
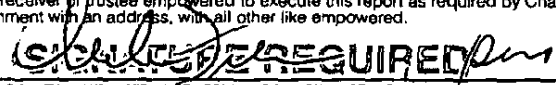


FILED
Jun 04, 2003 8:00 am
Secretary of State
05-05-2003 91870 014 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005324					
1. Entity Name BRAEBURN AT STONEBRIDGE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 9809 NORTH AIRPORT ROAD NAPLES FL 34109			Mailing Address 1044 CASTELLO DR. #206 NAPLES FL 34103 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0786773 ☐ Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PESHKIN, JOHN R 8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON FL 34202			Name - Southwest Property Management Corp. Street Address (P.O. Box Number is Not Acceptable) 1044 Castello Dr. #206 City Naples, FL 34103		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  Russell Williams, Manager Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD FELJOO, JAMES 1620 WINDING OAKS WAY #102 NAPLES FL 34109 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SYNNOT, WILLIAM 1630 WINDING OAKS WAY #101 NAPLES FL 34109 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLER, LYNN M 1570 WINDING OAKS WAY #102 NAPLES FL 34109 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Werling, Bill 1665 Winding Oaks Way, # 103 Naples, FL 34109 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FROHMAN, DANIEL 9809 NORTH AIRPORT ROAD NAPLES FL 34109 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Frohman, Daniel 1660 Winding Oaks Way # 201 Naples, FL 34109 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KESSLER, RONALD 1685 WINDING OAKS WAY #203 NAPLES FL 34109 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kessler, Ronald ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

CR2E037 (10/02)