

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90033 004 ****61.25

DOCUMENT # N98000002455
 1. Entity Name
STONEHURST COMMUNITY ASSOCIATION, INC.



Principal Place of Business
**1050 S. LAKE SYBELIA DRIVE
 MAITLAND, FL 32751**

Mailing Address
**5703 RED BUG ROAD
 BOX 258
 WINTER SPRINGS, FL 32708-4969-US**

50015722



2. Principal Place of Business
5703 Red Bug Road

3. Mailing Address
5703 Red Bug Road

Suite, Apt. #, etc.
Box 258

Suite, Apt. #, etc.
Box 258

02042005 Chg-NP CR2E037 (10/03)

City & State
Winter Springs, FL

City & State
Winter Springs, FL

Zip
32708-4969

Country
USA

Zip
32708-4969

Country
USA

4. FEI Number
59-3508432

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CRONE, MARK A
 1050 S. LAKE SYBELIA DRIVE
 MAITLAND, FL 32751**

7. Name and Address of New Registered Agent

Name
James B. Euliano

Street Address (P.O. Box Number is Not Acceptable)
4585 Old Carriage Trail

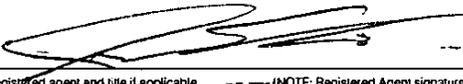
Attn: Stonehurst Community Association

City
Oviedo

State
FL

Zip Code
32765

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 James B. Euliano  Feb. 04, 2005

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
 Due by May 1, 2005**

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

**Make check payable to
 Florida Department of State**

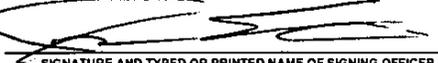
10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	EULIANO, JAMES	4585 OLD CARRIAGE TR	OVIDEO, FL 32765	<input type="checkbox"/>
VPD	CRONE, MARK A	1050 S. LAKE SYBELIA DRIVE	MAITLAND, FL 32751	<input checked="" type="checkbox"/>
S	HARTOG, MICHELLE	1528 HUNTERS MILL PLACE	OVIDEO, FL 32765	<input type="checkbox"/>
T	BEGLEY, PAT	4528 OLD CARRIAGE TR	OVIDEO, FL 32765	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P/D	James B. Euliano	4585 Old Carriage Tr	Oviedo, FL 32765	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V/D	Andy Toshie	1504 Hunters Mill Place	Oviedo, FL 32765	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S/D	Michelle Hartog	1528 Hunters Mill Place	Oviedo, FL 32765	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T/D	Pat Begley	4528 Old Carriage Tr	Oviedo, FL 32765	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: JAMES B. EULIANO  2/19/05 4074477321

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