2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 05, 2006
Secretary of State

DOCUMENT# N99000002629

Entity Name: STONEFIELD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O LELAND MANAGEMENT
8009 S. ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

C/O LELAND MANAGEMENT
8009 S. ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3575734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
8009 S. ORANGE AVE
ORLANDO, FL 32809 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 ( ) Delete
Name: O D'AUTORIO, GUDRUN
Address: 3175 HANGING MOSS CIR
City-St-Zip: KISSIMMEE, FL 34741

Title: VP ( ) Delete
Name: HALAWEH, SAMI
Address: 3171 HANGING MOSS CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: TR ( ) Delete
Name: MANION, RUSSELL
Address: 3113 HANGING MOSS CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: PEDALINO, PHILOMENA
Address: 3192 STONEHURST CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: SHEA, JO ELLEN
Address: 3177 HANGING MOSS CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHOWN, EDWARD
Address: 3119 HANGING MOSS CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

Title: VP (X) Change ( ) Addition
Name: BOB, WEISS
Address: 3181 RIVER BRANCH CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

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

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

Title: S (X) Change ( ) Addition
Name: DUPRE, JANISE F
Address: 3147 HANGING MOSS CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD CHOWN P 07/05/2006

Electronic Signature of Signing Officer or Director — Date