## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N99000002629

TI FILED
Sep 29, 2006
Secretary of State

Entity Name: STONEFIELD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** C/O LELAND MANAGEMENT 8009 S. ORANGE AVE ORLANDO, FL 32809 **New Mailing Address: Current Mailing Address:** C/O LELAND MANAGEMENT 8009 S. ORANGE AVE ORLANDO, FL 32809 FEI Number: 59-3575734 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: LELAND MANAGEMENT 8009 S. ORANGE AVE ORLANDO, FL 32809 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: () Delete () Change () Addition CHOWN, EDWARD Name: Name: 3119 HANGING MOSS CIRCLE Address: Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: Title: Title: VΡ ( ) Delete (X) Change ( ) Addition BOB, WEISS Name: WEISS, BOB Name: Address: 3181 RIVER BRANCH CIRCLE Address: 3181 RIVER BRANCH CIRCLE City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 Title: () Delete Title: (X) Change ( ) Addition MANION, RUSSELL DUPRE, JANISE Name: Name: 3113 HANGING MOSS CIRCLE 3147 HANGING MOSS CIRCLE Address: Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 Title: ( ) Delete Title: (X) Change ( ) Addition Name: PEDALINO, PHILOMENA Name: DUPRE, JANISE 3192 STONEHURST CIRCLE Address: Address: 3147 HANGING MOSS CIRCLE City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 Title: () Delete Title: (X) Change ( ) Addition DUPRE, JANISE F GILLIAN, JAMES Name: Name: 3147 HANGING MOSS CIRCLE 3430 FERNWOOD DRIVE Address: Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 Title: () Delete Title: ( ) Change (X) Addition PEDALINO, PHILOMENA Name: Name: Address: Address: 3192 STONEHURST CIRCLE KISSIMMEE, FL 34741 City-St-Zip: City-St-Zip:

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 PR 09/29/2006