

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90086 026 ****61.25

DOCUMENT # N00000002688					
1. Entity Name STRATFORD POINTE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 835 SEDGEWOOD CIRCLE MELBOURNE, FL 32904			Mailing Address P.O. BOX 121431 MELBOURNE, FL 32904		
2. Principal Place of Business		3. Mailing Address 1617 Cooling Ave			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		Melbourne FL			
Zip	Country	32935	USA	4. FEI Number 59-3653102	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRENCH, LAWRENCE H 835 SEDGEWOOD CIRCLE MELBOURNE, FL 32904			7. Name and Address of New Registered Agent Name: Space Coast Property Management Street Address (P.O. Box Number is Not Acceptable): 1617 Cooling Ave City: Melbourne FL Zip Code: 32935		
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:		MAKE JACKSON		4/27/11	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing <input type="checkbox"/>		\$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	P FRENCH, LAWRENCE H 835 SEDGEWOOD CIRCLE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Bremke, Bob 1122 Bainbury Lane West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DECARA, PHILIP J 994 SEDGEWOOD CIRCLE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Gubernat, Jillann 8590 Stratford Pointe Drive West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BUTLER, DANIEL S 1055 SEDGEWOOD CIRCLE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S mealio, Nancy 1184 Sedgewood Circle West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THOMAS, ROBERT 2421 STRATFORD POINT DRIVE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Nowell, Brad 1102 Bainbury Lane West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILLO, MARIO 1100 OLDE BAILEY LANE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gatzmer, Sue 525 Sedgewood Circle West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELLROSE, ESTHERITH 405 SEDGEWOOD CIRCLE MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Meyer, Joyce 1331 Olde Bailey Lane West Melbourne, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:			4/10/05 (321) 952-3099		
SIGNATURE AND TYPE OF OFFICER OR DIRECTOR			Date Daytime Phone #		
ROBERT BREMKE					