

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90202 023 ****61.25

DOCUMENT # N96000002500

1. Entity Name
STONEBROOK TERRACE ASSOCIATION II, INC.



Principal Place of Business
**PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLENGARY ST.
SARASOTA, FL 34231**

Mailing Address
**PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLENGARY ST.
SARASOTA, FL 34231**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01162007

Chg-NP

CR2E037 (12/06)

4. FEI Number
65-0672798

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

**PROGRESSIVE COMMUNITY MGMT., INC.
1801 GLENGARY ST.
SARASOTA, FL 34231**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2007**

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 PD ☐ Delete
NAME HOLWERDA, GERALD
STREET ADDRESS 8755 OLDE HICKORY AVE #8110
CITY-ST-ZIP SARASOTA, FL 34238

TITLE D ☐ Change ☒ Addition
NAME SPEYER, DON
STREET ADDRESS 8735 OLDE HICKORY AVE. #8205
CITY-ST-ZIP SARASOTA, FL 34238

TITLE VD ☐ Delete
NAME IGNATOWSKI, ROBERT
STREET ADDRESS 8735 OLDE HICKORY AVE., UNIT 8210
CITY-ST-ZIP SARASOTA, FL 34238

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME KLAMERT, GEORGE
STREET ADDRESS 8735 OLDE HICKORY AVE., UNIT 8109
CITY-ST-ZIP SARASOTA, FL 34238

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME CHRISTIANSON, JESSICA MS.
STREET ADDRESS 8735 OLDE HICKORY AVENUE #8309
CITY-ST-ZIP SARASOTA, FL 34238

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME MARKEL, JIM
STREET ADDRESS 1801 GLENGARY ST.
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME SUTTON, WILLIAM
STREET ADDRESS 1801 GLENGARY ST.
CITY-ST-ZIP SARASOTA, FL 34231

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim MARKEL

4/20/07

Date

941-921-5393

Daytime Phone #