

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004369

FILED  
Jan 18, 2008  
Secretary of State

Entity Name: STERLING PLACE OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

4400 NW 36 AVE  
GAINESVILLE, FL 32606 US

## New Principal Place of Business:

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

4400 NW 36 AVE  
GAINESVILLE, FL 32606 US

## New Mailing Address:

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

FEI Number: 59-3244892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANAGMENT SPECIALISTS  
4400 NW 36 AVE  
GAINESVILLE, FL 32606 US

## Name and Address of New Registered Agent:

MANAGMENT SPECIALISTS  
5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 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:

01/18/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: COWLES, CHRIS  
Address: 6911 NW 47 TERR  
City-St-Zip: GAINESVILLE, FL 32653

Title: DVP ( ) Delete  
Name: LARCHE, JAMES  
Address: 4919 NW 71 PLACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: DT ( ) Delete  
Name: SHOCKLEY, MIKE  
Address: 4919 NW 72 PLACE  
City-St-Zip: GAINESVILLE, FL 32653

Title: DS ( ) Delete  
Name: SHURTLEFF, LEN  
Address: 6915 NW 49 STREET  
City-St-Zip: GAINESVILLE, FL 32653

Title: D (X) Delete  
Name: HOCTOR, LORRAINE  
Address: 5014 NW 71 PLACE  
City-St-Zip: GAINESVILLE, FL 32653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: SHURTLEFF, LEONARD  
Address: 6915 NW 49TH STREET  
City-St-Zip: GAINESVILLE, FL 32653

Title: D (X) Change ( ) Addition  
Name: HOCTOR, LORRAINE  
Address: 5014 NW 71ST PLACE  
City-St-Zip: GAINESVILLE, FL 32653

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

I hereby certify that the information supplied with this filing does not qualify 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: CHRIS COWLES

P

01/18/2008

Electronic Signature of Signing Officer or Director

Date