## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000697

Entity Name: STONE CREEK HOMEOWNERS ASSOCIATION, INC.

**FILED** Apr 07, 2020 **Secretary of State** 2263736872CC

## **Current Principal Place of Business:**

2180 WEST SR 434 **SUITE 5000** LONGWOOD, FL 32779

## **Current Mailing Address:**

2180 WEST SR 434 **SUITE 5000** LONGWOOD, FL 32779 US

FEI Number: 59-3666819 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SENTRY MANAGEMENT INC 2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 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: BRADLEY POMP 04/07/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title VP, DIRECTOR RAKESTRAW, DEREK Name Name REICH, JULIA

2180 WEST SR 434 STE 5000 Address Address 2180 WEST SR 434 STE 5000 LONGWOOD FL 32779

City-State-Zip: LONGWOOD FL 32779 City-State-Zip:

Title SECRETARY, TREASURER, Title DIRECTOR DIRECTOR

Name CHEVALIER, DAWN MARIE Address 2180 WEST SR 434 STE 5000

2180 WEST SR 434 Address LONGWOOD FL 32779 City-State-Zip:

**SUITE 5000** 

LONGWOOD FL 32779 City-State-Zip:

Title DIRECTOR

Name

STACHOWICZ, JACQUELYN Name

PHILLIPS, WALLACE

2180 WEST SR 434 Address

**SUITE 5000** 

City-State-Zip: LONGWOOD FL 32779

I hereby 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 all other like empowered.

SIGNATURE: DEREK RAKESTRAW **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

04/07/2020 Date