2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007292

Entity Name: HORIZONS AT STONEBRIDGE VILLAGE CONDOMINIUM

ASSOCIATION II, INC.

Apr 28, 2017 Secretary of State CC8369597377

FILED

Current Principal Place of Business:

7990 BAYMEADOWS RD. E JACKSONVILLE, FL 32256

Current Mailing Address:

175 HAMPTON POINT DRIVE SUITE 4

ST. AUGUSTINE, FL 32092 US

FEI Number: 22-3849748 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEVERN TRENT SERVICES, INC 175 HAMPTON POINT DRIVE SUITE 4

ST. AUGUSTINE, FL 32092 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: HOLLY DONAHUE 04/28/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name LOCASCIO, PAT Name HENSON, NANCY

Address 175 HAMPTON POINT DRIVE Address 175 HAMPTON POINT DRIVE

SUITE 4 SUITE 4

City-State-Zip: ST. AUGUSTINE FL 32092 City-State-Zip: ST. AUGUSTINE FL 32092

Title TREASURER Title SECRETARY

Name HOGARTY, TIM Name THOMPSON, AVERRELL

Address 175 HAMPTON POINT DRIVE Address 175 HAMPTON POINT DRIVE

SUITE 4 SUITE 4

City-State-Zip: ST. AUGUSTINE FL 32092 City-State-Zip: ST. AUGUSTINE FL 32092

Title DIRECTOR

Name HUTCHINSON, WINDLE

Address 175 HAMPTON POINT DRIVE

SUITE 4

City-State-Zip: ST. AUGUSTINE FL 32092

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: TIMOTHY HOGARTY TREASURER

04/28/2017 Date