#### SIGNATURE: TAMMY COLLINS PRESIDENT

Electronic Signature of Signing Officer/Director Detail

**Officer/Director Detail :** 

above, or on an attachment with all other like empowered.

Title	VP, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	STEGER, SARAH	Name	COLLINS, TAMMY
Address	3902 BRIDGES ROAD	Address	3902 BRIDGES ROAD
City-State-Zip:	GROVELAND FL 34736	City-State-Zip:	GROVELAND FL 34736

# 2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0200008860

Entity Name: VISTAS AT STONEBRIDGE PLACE CONDOMINIUM ASSOCIATION, INC.

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

3902 BRIDGES ROAD GROVELAND, FL 34736

## **Current Mailing Address:**

P.O. BOX 1009 GROVELAND, FL 34736 US

## FEI Number: 46-0511679

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MOSAIC SERVICES LLC 3902 BRIDGES ROAD GROVELAND, FL 34736 US

FILED Mar 16, 2021 Secretary of State 2534506441CC

Certificate of Status Desired: No

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: JENNIFER S CAIN 03/16/2021

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

Date

03/16/2021