

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007117

Entity Name: STOCKTON VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11270 SW TOWN PARK AVENUE
PORT ST. LUCIE, FL 34987

Current Mailing Address:

11270 SW TOWN PARK AVENUE
PORT ST. LUCIE, FL 34987

FEI Number: 20-5987648

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE P.A.
1900 N COMMERCE PKWY
WESTON, FL 33326 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name CARTER, JOHN
Address 4400 WEST SAMPLE ROAD SUITE 200
City-State-Zip: COCONUT CREEK FL 33073

Title DV
Name CARAPAZZA, FRANK
Address 11270 SW TOWNPARK AVE
City-State-Zip: PORT ST. LUCIE FL 34987

Title DST
Name KROLL, JANET
Address 4400 WEST SAMPLE ROAD SUITE 200
City-State-Zip: COCONUT CREEK FL 33073

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: JANET KROLL

SECRETARY

03/25/2014

Electronic Signature of Signing Officer/Director Detail

Date