

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007849

**Entity Name:** STILTSVILLE TRUST, INC.

**Current Principal Place of Business:**

KEVIN J MASE  
1414 ALEGRAINO AVE.  
CORAL GABLES, FL 33146

**Current Mailing Address:**

KEVIN J MASE  
1414 ALEGRAINO AVE.  
CORAL GABLES, FL 33146 US

**FEI Number:** 20-0145949

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TUTTLE, WILLIAM II  
700 SOUTH DIXIE HIGHWAY  
SUITE #200  
CORAL GABLES, FL 33146 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           | PC                                  |
| Name            | MASE, KEVIN J                       |
| Address         | KEVIN J MASE<br>1414 ALEGRAINO AVE. |
| City-State-Zip: | CORAL GABLES FL 33146               |

|                 |                       |
|-----------------|-----------------------|
| Title           | T                     |
| Name            | ROBERTS, JEFF         |
| Address         | 6105 GRANADA BLVD     |
| City-State-Zip: | CORAL GABLES FL 33146 |

*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:** KEVIN J MASE

**CHAIRMAN**

**03/03/2015**

Electronic Signature of Signing Officer/Director Detail

Date