

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000948

**Entity Name:** STONECREEK PROPERTY OWNERS ASSOCIATION,INC.

**Current Principal Place of Business:**

4250 AZALEA DR.  
NAPLES, FL 34119

**Current Mailing Address:**

4250 AZALEA DR.  
NAPLES, FL 34119 US

**FEI Number: 47-2972018**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT  
200  
FORT MYERS, FL 33966 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: JOSEPH E. ADAMS, ESQUIRE**

**02/23/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name SEWARD, CHRISTINE  
Address 3900 WOODLAKE BOULEVARD  
309  
City-State-Zip: GREENACRES FL 33463

Title PRESIDENT  
Name RIZZI, ANGELA  
Address 3900 WOODLAKE BOULEVARD  
309  
City-State-Zip: GREENACRES FL 33463

Title TREASURER  
Name WEITZ, JILL A  
Address 3900 WOODLAKE BOULEVARD  
309  
City-State-Zip: GREENACRES FL 33463

Title VP  
Name MOSS, MARK  
Address 3900 WOODLAKE BOULEVARD  
309  
City-State-Zip: GREENACRES FL 33463

Title VP, DIRECTOR  
Name BAKER, MALLORY  
Address 3900 WOODLAKE BOULEVARD  
309  
City-State-Zip: GREENACRES FL 33463

*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: RIZZI, ANGELA**

**PRESIDENT**

**02/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date