## **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35575

Entity Name: STONECREST PROPERTY OWNERS ASSOCIATION, INC.

FILED
May 14, 2020
Secretary of State
4223467022CC

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

6972 LAKE GLORIA BLVD. ORLANDO. FL 32809

## **Current Mailing Address:**

6972 LAKE GLORIA BLVD ORLANDO, FL 32809-3200

FEI Number: 59-3171732 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LELAND MANAGEMENT 6972 LAKE GLORIA BLVD ORLANDO, FL 32809 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: REBECCA FURLOW 05/14/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP

Name CETLINSKI, JAMES Name HUFF, PATRICIA L

Address 6972 LAKE GLORIA BLVD Address 6972 LAKE GLORIA BLVD

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

TitleTREASURERTitleDIRECTORNameMAKOWSKY, PETERNameOLSEN, BOB

Address 6972 LAKE GLORIA BLVD Address 6972 LAKE GLORIA BLVD

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Title SECRETARY Title DIRECTOR
Name GLEICH, SANDRA Name BORER, PHILIP

Address 6972 LAKE GLORIA BLVD Address 6972 LAKE GLORIA BLVD

City-State-Zip: ORLANDO FL 32809 City-State-Zip: ORLANDO FL 32809

Title DIRECTOR
Name LEPORE, MARC

Address 6972 LAKE GLORIA BLVD.
City-State-Zip: ORLANDO FL 32809

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: JAMES CETLINSKI PRESIDENT 05/14/2020

Date