

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002203

**FILED
Mar 31, 2014
Secretary of State
CC9806916348**

Entity Name: ESTATES OF STIRLING LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1145 SAWGRASS CORP. PKWY
SUNRISE, FL 33323

Current Mailing Address:

1145 SAWGRASS CORP. PKWY
SUNRISE, FL 33323

FEI Number: 65-0424844

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKALAR & ASSOCIATES, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 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 ENGELER, RALPH
Address 1145 SAWGRASS CORP. PKWY
City-State-Zip: SUNRISE FL 33323

Title DVP
Name JOFFRION, LORRAINE
Address 1145 SAWGRASS CORP. PKWY
City-State-Zip: SUNRISE FL 33323

Title DT
Name DORN, CRAIG
Address 1145 SAWGRASS CORP. PKWY
City-State-Zip: SUNRISE FL 33323

Title DS
Name KRAJSA, GEORGE
Address 1145 SAWGRASS CORP. PKWY
City-State-Zip: SUNRISE FL 33323

Title D
Name CHALLACOMBE, WESELY
Address 1145 SAWGRASS CORP. PKWY
City-State-Zip: SUNRISE FL 33323

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: RALPH ENGELER

PRESIDENT

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date