

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N94000000883

**Entity Name:** STONEYBROOK CLUBSIDE CONDOMINIUM I ASSOCIATION,  
INC.

**Current Principal Place of Business:**

ADVANCE MGT, INC, OF SW FLORIDA  
9031 TOWN CENTER PARKWAY  
BRADENTON, FL 34202

**Current Mailing Address:**

ADVANCE MGT, INC, OF SW FLORIDA  
9031 TOWN CENTER PARKWAY  
BRADENTON, FL 34202 US

**FEI Number:** 65-0473227

**Certificate of Status Desired:** No

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

ADVANCED MGT, INC. OF SW FLORIDA  
9301 TOWN CENTER PARKWAY  
BRADENTON, FL 34202 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            PRESIDENT  
Name            POTENZA, JIM  
Address        ADVANCE MGT, INC, OF SW FLORIDA  
                  9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202  
  
Title            AS  
Name            WILSON, MATHEW D.  
Address        ADVANCE MGT, INC, OF SW FLORIDA  
                  9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            VP  
Name            EMMER, YALE  
Address        ADVANCE MGT, INC, OF SW FLORIDA  
                  9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202  
  
Title            DIRECTOR  
Name            RUSSO, RANDI  
Address        ADVANCE MGT, INC, OF SW FLORIDA  
                  9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

*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:** MATHEW D. WILSON

**ASST. SECRETARY**

**04/26/2022**

Electronic Signature of Signing Officer/Director Detail

Date