

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000005193

**Entity Name:** STONEBRIDGE HOMEOWNERS' ASSOCIATION OF INDIAN RIVER COUNTY, INC.**FILED**  
**Mar 15, 2016**  
**Secretary of State**  
**CC7022004298****Current Principal Place of Business:**KEYSTONE PROPERTY MGMT GROUP, INC  
2001 9TH AVE #308  
VERO BEACH, FL 32960**Current Mailing Address:**KEYSTONE PROPERTY MGMT GROUP, INC  
2001 9TH AVE #308  
VERO BEACH, FL 32960 US**FEI Number: 59-3281713****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LEE, WILLIAM C  
2001 9TH AVE #308  
VERO BEACH, FL 32960 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: WILLIAM C LEE****03/15/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title DIRECTOR, TREASURER  
Name O'MALLEY, SEAN  
Address 5180 3RD MANOR  
City-State-Zip: VERO BEACH FL 32968Title PRESIDENT, DIRECTOR  
Name WOOD, TONY  
Address 5250 3RD MANOR  
City-State-Zip: VERO BEACH FL 32968Title VP, DIRECTOR  
Name MCSHEA, EDWARD  
Address 5180 3RD MANOR  
City-State-Zip: VERO BEACH FL 32968Title SECRETARY, DIRECTOR  
Name KRANCE, LISA  
Address 366 53RD CIRCLE  
City-State-Zip: VERO BEACH FL 32968Title DIRECTOR  
Name TARPEY, EDWARD  
Address 5125 3RD MANOR  
City-State-Zip: VERO BEACH FL 32968

*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: TONY WOOD****PRESIDENT****03/15/2016**

Electronic Signature of Signing Officer/Director Detail

Date