

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006045

**FILED
Mar 27, 2015
Secretary of State
CC4479223245**

Entity Name: STONEGATE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11820 TURKEY CREEK BLVD.
ALACHUA, FL 32615

Current Mailing Address:

P.O. BOX 310
ALACHUA, FL 32616-0310 US

FEI Number: 59-3423665

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATION MANAGEMENT SOLUTIONS, LLC
11820 TURKEY CREEK BLVD.
ALACHUA, FL 32615 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	P	Title	SECRETARY, TREASURER
Name	KNOWLES, JACQUI	Name	NOFFSINGER, WILLIAM B
Address	13739 NW 91ST PLACE	Address	13271 NW 93RD LANE
City-State-Zip:	ALACHUA FL 32615	City-State-Zip:	ALACHUA FL 32615

Title VP
Name SHINDLE, RANDY
Address 13427 NW 93RD LANE
City-State-Zip: ALACHUA FL 32615

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: JACQUI KNOWLES

PRESIDENT

03/27/2015

Electronic Signature of Signing Officer/Director Detail

Date