

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003609

**Entity Name:** STONEBROOK ESTATES COMMUNITY ASSOCIATION, INC.

**FILED**  
**Apr 26, 2017**  
**Secretary of State**  
**CC1859508229**

**Current Principal Place of Business:**

C/O CASTLE MANAGEMENT  
12270 SW 3RD STREET  
PLANTATION, FL 33325

**Current Mailing Address:**

C/O CASTLE MANAGEMENT  
12270 SW 3RD STREET 200  
PLANTATION, FL 33325 US

**FEI Number: 65-0623137**

**Certificate of Status Desired: No**

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

BAKALAR & ASSOCIATES  
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 D  
Name ASSD, ISSA  
Address 12767 EQUESTRIAN TRAIL  
City-State-Zip: DAVIE FL 33330

Title VP  
Name GLOVER, JOHN  
Address 12375 STONEBROOK DRIVE  
City-State-Zip: DAVIE FL 33330

Title S  
Name GARCIA, FIDEL  
Address 12568 S. STONEBROOK CIR.  
City-State-Zip: DAVIE FL 33330

Title P  
Name ANDERSON, BRIAN  
Address 3453 W. STONEBROOK CIR.  
City-State-Zip: DAVIE FL 33330

Title T  
Name HAEFLINGER, JOHN  
Address 3353 STONEBROOK DRIVE  
City-State-Zip: DAVIE FL 33330

Title D  
Name JACOBS, JEROME  
Address 3201 E STONEBROOK ESTATES  
City-State-Zip: DAVIE FL 33330

Title DIRECTOR  
Name MARTINE, MARCIA  
Address 12648 S STONEROOK CIRCLE  
City-State-Zip: DAVIE FL 33330

*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: BRIAN ANDERSON**

**PRESIDENT**

**04/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date