

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750204

FILED
Jul 02, 2007
Secretary of State

Entity Name: STONEBRIDGE GARDENS, SECTION TWO, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

950 SOUTH PINE ISLAND ROAD, SUITE 150
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

2900 NORTHWEST 55TH AVENUE
LAUDERHILL, FL 33313 US

New Mailing Address:

FEI Number: 59-2085862 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEWIS, GEORGE G ESQ.
950 SOUTH PINE ISLAND ROAD, SUITE 150
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: FABIAN, CHARLES
Address: 2900 NW 55 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: PD () Delete
Name: NELSON, SANDRA
Address: 2900 NW 55 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: TD () Delete
Name: SMITH, CAMILLE
Address: 2900 NW 55 AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: SD () Delete
Name: LEYS, PATRICE
Address: 2900 NORTHWEST 55 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: D (X) Delete
Name: BAILEY, MICHELLE D
Address: 2900 NORTHWEST 55 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WILLSON, LAURA
Address: 2900 NORTHWEST 55 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SANDRA NELSON

PD

07/02/2007

Electronic Signature of Signing Officer or Director

Date