

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756846

FILED
Apr 05, 2005
Secretary of State

Entity Name: STONEHEDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4602 GLENSIDE CIR
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

4602 GLENSIDE CIR
TAMPA, FL 33624 US

New Mailing Address:

FEI Number: 59-2112317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOREHAND, JAMES
4602 GLENSIDE CIR
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

WALZ, SHELLEY
4604 GLENSIDE CIR
TAMPA, FL 33624 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: SHELLEY WALZ

04/05/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: WALZ, SHELLEY
Address: 4604 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: PD () Delete
Name: FOREHAND, JAMES
Address: 4602 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: ROSEMARY, GEARY
Address: 4607 GLENSIDE CT
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: CALLAWAY, CINDY
Address: 4645 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: SD (X) Delete
Name: GAFFNEY, BETH
Address: 4651 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALZ, SHELLEY
Address: 4604 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: VD (X) Change () Addition
Name: GAFFNEY, BETH
Address: 4651 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: TD (X) Change () Addition
Name: FOREHAND, JAMES D
Address: 4602 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

Title: SD (X) Change () Addition
Name: GLENNON, SUSAN A
Address: 4613 GLENSIDE CIR
City-St-Zip: TAMPA, FL 33624

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES D. FOREHAND

TD

04/05/2005

Electronic Signature of Signing Officer or Director

Date