2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006
Secretary of State

DOCUMENT# 757475

Entity Name: STONE ISLAND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

STONE ISLAND
ENTERPRISE, FL 32725 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4277
ENTERPRISE, FL 32725 US

New Mailing Address:

FEI Number: 59-1384242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHILLIPS, FRED
1440 STONE TRAIL
ENTERPRISE, FL 32725 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: TD ( ) Delete
Name: DEBOER, GAYLE A
Address: 1300 KETTLEDRUM TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: VD ( ) Delete
Name: NANSTIEL, BILL
Address: 1480 WARRIOR TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: AS ( ) Delete
Name: BOSS, DONALD
Address: 1555 STONE TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: D ( ) Delete
Name: LEWIS 111, THOMAS M
Address: 447 WARRIOR TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: PD ( ) Delete
Name: TESSIER, MED
Address: 1530 STONE TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: SD ( ) Delete
Name: MERCER, JAMES R
Address: 1400 STONE TRAIL
City-St-Zip: ENTERPRISE, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: NANSTIEL, BILL
Address: 1480 WARRIOR TRAIL
City-St-Zip: ENTERPRISE, FL 32725

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

Title: VPD (X) Change ( ) Addition
Name: LEWIS 111, THOMAS M
Address: 447 WARRIOR TRAIL
City-St-Zip: ENTERPRISE, FL 32725

Title: PD (X) Change ( ) Addition
Name: ZILLMANN, DOUGLAS J
Address: 341 OLD MILL RD
City-St-Zip: ENTERPRISE, FL 32725

Title: SD (X) Change ( ) Addition
Name: FLOWERS, JOAN
Address: 1554 ARROWHEAD TRAIL
City-St-Zip: ENTERPRISE, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the 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: GAYLE A. DEBOER TD 04/07/2006

Electronic Signature of Signing Officer or Director — Date