

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766282

FILED
Jan 15, 2009
Secretary of State

Entity Name: STONEWOOD VILLAS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

25 E SILVER SPRINGS BLVD
OCALA, FL 34470

New Principal Place of Business:

2123 SW 20TH PLACE
OCALA, FL 34471

Current Mailing Address:

25 E SILVER SPRINGS BLVD
OCALA, FL 34470

New Mailing Address:

2123 SW 20TH PLACE
OCALA, FL 34471

FEI Number: 59-2961976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSSHARDT PROPERTY MANAGEMENT, INC.
25 E SILVER SPRINGS BLVD
OCALA, FL 34470 US

Name and Address of New Registered Agent:

BOSSHARDT PROPERTY MANAGEMENT, INC.
2123 SW 20TH PLACE
OCALA, FL 34471 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: GARRY GRIFFIN

01/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: HUME, MAXINE
Address: 530 45TH TERRACE NE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: RAYM, KEN
Address: 4551 6TH STREET NE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: MEYER, JOHN
Address: 4421 4TH STREET NE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: PATRICK, TOM
Address: 4578 6TH STREET NE
City-St-Zip: OCALA, FL 34470

Title: PD () Delete
Name: PULVER, BILL
Address: 4501 4TH STREET NE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: HUME, MAXINE
Address: 530 NE 45TH TERRACE
City-St-Zip: OCALA, FL 34470

Title: D (X) Change () Addition
Name: WEBER, ROBERT
Address: 606 NE 45 CT.
City-St-Zip: OCALA, FL 34470

Title: D (X) Change () Addition
Name: MEYER, JOHN
Address: 4421 NE 4TH STREET
City-St-Zip: OCALA, FL 34470

Title: D (X) Change () Addition
Name: PATRICK, TOM
Address: 4578 NE 6TH STREET
City-St-Zip: OCALA, FL 34470

Title: PD (X) Change () Addition
Name: PULVER, BILL
Address: 4501 NE 4TH STREET
City-St-Zip: OCALA, FL 34470

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: MAXINE HUME

STD

01/15/2009

Electronic Signature of Signing Officer or Director

Date