## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 767545**

FILED Mar 27, 2009 Secretary of State

Entity Name: THE STONEGATE OFFICEOWNERS ASSOCIATION, INC.

US

**Current Principal Place of Business: New Principal Place of Business:** 

7100 PLANTATION RD PENSACOLA, FL 32504

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 12507 P.O. BOX 12507

DESTIN, FL 325412507 US PENSACOLA, FL 325912507 US

FEI Number: 59-3047937 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MOODY, SUSAN MOODY, SUSAN L 33 SOUŤH 9TH AVE 33 SO. 9TH AVE

PENSACOLA, FL 32502 US US PENSACOLA, FL 32502

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: SUSAN L. MOODY 03/27/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

CARLSON, JIM CARLSON, JIM Name: Name: 7100 PLANTATION RD., #21 Address: 33 SOUTH 9TH AVE Address: City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32502

Title: DST ( ) Delete Title: VPD (X) Change ( ) Addition Name:

LANDRUM JR., BRITT H Name: KOPKO, ROBERT Address: 4030 BEVEDERE DRIVE Address: 33 SOUTH 9TH AVE City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32502

Title: () Delete Title: (X) Change ( ) Addition

KOPKO, ROBERT LANDRUM, BRITT H JR Name: Name: 7100 PLANTATION RD #9 Address: Address: 33 SOUTH 9TH AVE City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32502

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: JIM CARLSON PD 03/27/2009