

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001470

FILED  
Jan 26, 2011  
Secretary of State

**Entity Name:** STILLWATER HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

514 N INDIANA AVENUE  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

514 N INDIANA AVENUE  
ENGLEWOOD, FL 34223

**New Mailing Address:**

**FEI Number:** 65-1036924

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARTLAND, BRIAN  
ATRIUM CAM INC.  
514 NORTH INDIANA AVE.  
ENGLEWOOD, FL 34223 US

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

CARTLAND, JULIA  
ATRIUM CAM INC.  
514 NORTH INDIANA AVE.  
ENGLEWOOD, FL 34223 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: JULIA CARTLAND

01/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COLLINS, BRUCE  
Address: 307 LAKE TAHOE  
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP  
Name: CARLSEN, TOM  
Address: 102 ABERCROMBIE AVE  
City-St-Zip: ENGLEWOOD, FL 34223

Title: S  
Name: TYRER, TOM  
Address: 309 LAKE TAHOE CT.  
City-St-Zip: ENGLEWOOD, FL 34223

Title: T  
Name: EGAN, SUSAN  
Address: 208 LAKE VICTORIA CT  
City-St-Zip: ENGLEWOOD, FL 34223

Title: D  
Name: ROXBY, ELEANOR  
Address: 12647 MONTIGELLO CT  
City-St-Zip: ENGLEWOOD, FL 34223

I hereby 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 all other like empowered.

SIGNATURE: BRUCE COLLINS

P

01/26/2011

Electronic Signature of Signing Officer or Director

Date