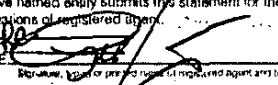
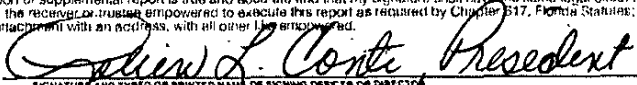


Sunday, January 06, 2008
9:01 PM

FILED
Jan 25, 2008 08:00 AM
Secretary of State

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N00000005470		
1. Entity Name STILLWATER ON THE BAY PROPERTY OWNERS ASSOCIATION, INC.		
Principal Place of Business 1655 BAY HARBOR LANE SARASOTA, FL 34231	Mailing Address 1655 BAY HARBOR LANE SARASOTA, FL 34231	
DO NOT WRITE IN THIS SPACE		
		01062008 No Chg-NP CR2E037 (4/06)
4. FEI Number 65-1045681		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CHAD L. GATES, P.A. 1074 N. ORANGE AVENUE SUITE 102 SARASOTA, FL 34236		
DO NOT WRITE IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE:  U000000797270 01/23/08-80066-023 61.25 (Signature of agent or person named as registered agent and their typewritten name. (NOTE: Registered Agent signature required when registering)		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT CONTI, ROBIN L 1655 BAY HARBOR LANE SARASOTA, FL 34231	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAZESKI, DAVID 1655 BAY HARBOR LANE SARASOTA, FL 34231	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DUNN, SHARI 1640 BAY HARBOR LANE SARASOTA, FL 34231	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other filers empowered.		
SIGNATURE:  President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		