

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005470

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** STILLWATER ON THE BAY PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1655 BAY HARBOR LANE  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

1655 BAY HARBOR LANE  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 65-1045881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAD L. GATES, P.A.  
1074 N. ORANGE AVENUE  
SUITE 102  
SARASOTA, FL 34236 US

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

MCCLLENATHEN, CHAD M P.A.  
1820 RINGLING BLVD.  
SARASOTA, FL 34236 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: CHAD M. MCCLLENATHEN, P.A.

02/11/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PDT ( ) Delete  
Name: CONTI, ROBIN L  
Address: 1655 BAY HARBOR LANE  
City-St-Zip: SARASOTA, FL 34231

Title: VD ( ) Delete  
Name: LAZESKI, DAVID  
Address: 1655 BAY HARBOR LANE  
City-St-Zip: SARASOTA, FL 34231

Title: SD ( ) Delete  
Name: DUNN, SHARI  
Address: 1640 BAY HARBOR LANE  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: LAZESKI, DAVID  
Address: 1630 BAY HARBOR LANE  
City-St-Zip: SARASOTA, FL 34231

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

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: ROBIN L. CONTI

PDT

02/11/2009

Electronic Signature of Signing Officer or Director

Date