

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007452

FILED  
Feb 14, 2012  
Secretary of State

**Entity Name:** STOTESBURY VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

THE CONTINENTAL GROUP INC.  
3461-B FAIRLANE FARMS RD  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

THE CONTINENTAL GROUP INC.  
3461-B FAIRLANE FARMS RD  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-1158945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWSOME, JOHN  
C/O THE CONTINENTAL GROUP, INC.  
3461-B FAIRLANE FARMS ROAD  
WEST PALM BEACH, FL 33414 US

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

MARTIN, ROBERT  
MARTIN & BENNIS, P.A.  
319 SOUTHEAST 14TH STREET  
FORT LAUDERDALE, FL 33316 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: ROBERT MARTIN

02/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WILLIAMS, NEIL  
Address: 2239 STOTEBURY WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: VP  
Name: WHEELEN, ELLEN  
Address: 9662 WORSWICK CT  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: KOHLBECK, MARK  
Address: 9457 WORSWICK CT  
City-St-Zip: WELLINGTON, FL 33414

Title: S/T  
Name: MASILOTTI, PAUL  
Address: 9617 WORSWICK CT  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: WILLIAMSON, JAMES T  
Address: 9657 WORSWICK CT  
City-St-Zip: WELLINGTON, FL 33414

Title: P  
Name: MAY, DAVID  
Address: 2258 STOTEBURY WAY  
City-St-Zip: WELLINGTON, FL 33414

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: TARA CHIUCCHI

PM

02/14/2012

Electronic Signature of Signing Officer or Director

Date