

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 18, 2004
Secretary of State**

DOCUMENT# N02000004711

Entity Name: STONEGATE AT SILVER LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. STATE RD. 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

Current Mailing Address:

2180 W. STATE RD. 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

FEI Number: 32-0061880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC.
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 327795044

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHAMROCK, KEITH J
Address: 2100 LAKE EUSTIS DRIVE
City-St-Zip: TAVARES, FL 32778

Title: STD () Delete
Name: BROWN, FRED
Address: 2100 LAKE EUSTIS DRIVE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: SHAMROCK, FATJRICIA
Address: 2100 LAKE ELISTIS DR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: BROWN, FRED
Address: 2100 LAKE EUSTIS DRIVE
City-St-Zip: TAVARES, FL 32778

Title: VPD (X) Change () Addition
Name: SHAMROCK, PATRICIA
Address: 2100 LAKE ELISTIS DR
City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEITH SHAMROCK

PD

04/18/2004

Electronic Signature of Signing Officer or Director

Date