

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2006
Secretary of State**

DOCUMENT# N02000004711

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

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

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 US

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

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

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FRANKLIN, SONJA
Address: 33112 IRONGATE DR
City-St-Zip: LEESBURG, FL 32778

Title: VPD (X) Change () Addition
Name: ROBERTS, VANCE
Address: 89 LIME WOOD DR
City-St-Zip: TRENTON, NJ 08690

Title: SD (X) Change () Addition
Name: MOLER, STEPHANIE
Address: 33339 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: TD () Change (X) Addition
Name: DUNN, CHRISTOPHER
Address: 33137 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

Title: D () Change (X) Addition
Name: MOREL, RANDEE
Address: 33312 IRONGATE DR
City-St-Zip: LEESBURG, FL 34788

I hereby certify that the information supplied with this filing does not qualify for the 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: SONJA FRANKLIN

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date