2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004711

FILED Mar 21, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044

Current Mailing Address: 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: Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: FRANKLIN, SONJA Name: HANNAH, RUDY

Address: 33113 IRONGATE DR

Address: 33112 IRONGATE DR Address: 33327 IRONGATE DR City-St-Zip: LEESBURG, FL 32778 City-St-Zip: LEESBURG, FL 34788

Title: VPD () Delete Title: VPD (X) Change () Addition Name: ROBERTS, VANCE Name: REIHER, RUDY

Address: 89 LIME WOOD DR Address: 33226 IRONGATE DR
City-St-Zip: TRENTON, NJ 08690 City-St-Zip: LEESBURG, FL 32778

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 MOLER, STEPHANIE
 Name:
 RITCHIE, BECKY

 Address:
 33339 IRONGATE DR
 Address:
 33340 IRONGATE DR

 City-St-Zip:
 LEESBURG, FL 34788
 City-St-Zip:
 LEESBURG, FL 34788

Title: TD () Delete Title: D (X) Change () Addition

Name:DUNN, CHRISTOPHERName:QUISENBERRY, WILLIAMAddress:33137 IRONGATE DRAddress:33353 IRONGATE DRCity-St-Zip:LEESBURG, FL 34788City-St-Zip:LEESBURG, FL 34788

Name:MOREL, RANDÉEName:CROWLEY, RICKAddress:33312 IRONGATE DRAddress:33347 IRONGATE DRCity-St-Zip:LEESBURG, FL 34788City-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: RUDY HANNAH PD 03/21/2007