2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N03223



FILED Mar 30, 2007 8:00 am Secretary of State 03-30-2007 90127 005 ****61.25

INC.	STON WO	OODS CONDOM	INIUM AS	SSOCIATION	,								
				Address 26TH ST W ENTON, FL 3420	TH ST W			40045222					
2. Principal Place of Business - No P.O. Box # 3. I				Mailing Address									
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				03222007	Chg-NP	CR2E	037 (1	2/06)	
City & State			Cit	City & State				4. FEI Number Applied For 59-2491797 Not Applicable					
Zip				Zip Cou			5. Certificate of Status Desired \$8.75 Add Fee Required						
6. Name and Address of Current Registered A				d Agent				.7. Name and Address of New Registered Agent					
SNYDER, DONALD H. JR C PA 5603 26TH ST WEST BRADENTON. FL 34207						Name Street Address (P.O. Box Number is Not Acceptable)							
DIVIDENT	011, 1 2 0	4201								·			
					•	City				F	L Z	ip Code	e
	named entity tions of regist	y submits this statement lered agent.	for the purp	ose of changing its	registere	d office or	register	ed agent, or bot	h, in the State o	of Florida. I al	m famili	ar with,	and accept
SIGNATURE	Signature, lyped	or printed name of registered age	ent and title if app	licable. (NOTI	E: Registered	i Ageni signat	ure required	when reinstating)		DATE	<u> </u>		
Filing Fee is \$61.25 Due by May 1, 2007													
	-			9. Election Car Trust Fund C				\$5.00 May B		Make che Florida Dep			
10.	Due by M		DIRECTORS				A			Florida Dep	artmen	t of St	tate
10. IITLE NAME STREET ADDRESS CITY-ST-ZIP	P HENDER: 6044 27TI	OFFICERS AND C SON, MARION H ST W.	DIRECTORS		11. TITLE NAME STREE	on.		Added to Fees		Florida Dep	DIRECT	t of St	tate
TITLE NAME STREET ADDRESS	P HENDER: 6044 27TI BRADEN' D GARVEY, 6044 28TI	OFFICERS AND D OFFICERS AND D SON, MARION H ST W. TON, FL 34207	DIRECTORS	Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE	on. : Et address St-Zip	PEROBE	Added to Fees ADDITIONS/CHA AN CES 21 21 CADEN	ANGES TO OFF	EICERS AND EICERS AND EICERS AND	DIRECT X	ORS IN Change	I 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P HENDER: 6044 27TI BRADEN D GARVEY, 6044 28TI BRADEN T KIDD, JO 2713 60TI	OFFICERS AND OFFIC	DIRECTORS	Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PEROBE	Added to Fees ADDITIONS/CHA AN CES 21 21 CADEN	ANGES TO OFF	EICERS AND EICERS AND EICERS AND	DIRECT X	ORS IN Change	I 10 Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P HENDER: 6044 27TI BRADEN' D GARVEY, 6044 28TI BRADEN' T KIDD, JO' 2713 60TI BRADEN' V BAKER, E 2714-60TI BRADEN' S KINNEER 2709 60TI	OFFICERS AND OFFIC	DIRECTORS	Trust Fund C	11. TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	PRUBY DAR SCUBLKAT	Added to Fees ADDITIONS/CHA AN CES 21 25 ADEN UNA RE 19-60 ADENTE AILLE 23 2	ANGES TO OFF	EUR FL 3 FL 3 FL 3 FL 3 FL 3 FL 3 FL 3	HANGE HANGE	Change Change Change	Addition Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

Trances H. Manuel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR