

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006055

FILED  
Feb 14, 2011  
Secretary of State

**Entity Name:** STONE CREEK AT EAGLE HARBOR ASSOCIATION, INC.

**Current Principal Place of Business:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number:** 20-1268867

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHAFER, SHERRILL PCAM  
7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256 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  
**Name:** TAMAN, DONALD  
**Address:** 7400 BAYMEADOWS WAY, SUITE 317  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** D  
**Name:** WINTERS, JOHN  
**Address:** 7400 BAYMEADOWS WAY, SUITE 317  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** SEC  
**Name:** WOODS, AUDREY  
**Address:** 7400 BAYMEADOWS WAY, SUITE 317  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** T  
**Name:** FREY, ROBERT  
**Address:** 7400 BAYMEADOWS WAY, SUITE 317  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** VP  
**Name:** DUGAN, WILLIAM  
**Address:** 7400 BAYMEADOWS WAY, SUITE 317  
**City-St-Zip:** JACKSONVILLE, FL 32256

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:** SHERRILL SCHAFER

RA

02/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date