

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008575

FILED
Oct 04, 2005
Secretary of State

Entity Name: STONEYBROOK OAKS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

551 CATTLEMAN ROAD SUITE 202
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

551 CATTLEMAN ROAD SUITE 202
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 20-3547379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLOTTHAUER, WILLIAM G
200 S ORANGE AVE
SARASOTA, FL 34236 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: WILLIAM G. SCHLOTTHAUER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DANNA, CHARLES A JR
Address: 551 CATTLEMAN ROAD SUITE 202
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: ALLEGRA, ROBERT T
Address: 551 CATTLEMAN ROAD SUITE 202
City-St-Zip: SARASOTA, FL 34232

Title: STD () Delete
Name: SQUITIERI, ANTHONY J
Address: 551 CATTLEMAN ROAD SUITE 202
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DANNA, JR., CHARLES A
Address: 551 CATTLEMAN ROAD SUITE 202
City-St-Zip: SARASOTA, FL 34232

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

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

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: ANTHONY J. SQUITIERI

D

10/04/2005

Electronic Signature of Signing Officer or Director

Date