## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008575

FILED Apr 27, 2007 Secretary of State

Entity Name: STONEYBROOK OAKS COMMUNITY ASSOCIATION, INC.

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

551 CATTLEMAN ROAD SUITE 202 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

551 CATTLEMAN ROAD SUITE 202 SARASOTA, FL 34232

FEI Number: 20-3547379 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:

SCHLOTTHAUER, WILLIAM G 200 S ORANGE AVE SARASOTA, FL 34236 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: DANNA, JR., CHARLES A Name: KIRSCHNER, TERRY

Address: 551 CATTLEMAN ROAD SUITE 200 Address: 551 CATTLEMAN ROAD SUITE 200

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

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

Name: ALLEGRA, ROBERT T Name: WILSON, JENNIFER

Address: 551 CATTLEMAN ROAD SUITE 200 Address: 551 CATTLEMAN ROAD SUITE 200

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition Name: FISCHER, ROBYN Name: PRICE, ROBERT

Address: 551 CATTLEMAN ROAD SUITE 202 Address: 551 CATTLEMAN ROAD SUITE 202

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT PRICE STD 04/27/2007

Electronic Signature of Signing Officer or Director

Date