2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010982

FILED May 18, 2006 Secretary of State

Entity Name: STONEBRIAR AT BAYSIDE LAKES HOMEOWNERS ASSOCIATION, INC.

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

3391 BAYSIDE LAKES BLVD. SE 4087 US HWY. 1

PALM BAY, FL 32909 SUITE 3

ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

3391 BAYSIDE LAKES BLVD. SE 4087 US HWY. 1

PALM BAY, FL 32909 SUITE 3

ROCKLEDGE, FL 32955

FEI Number: 76-0790249 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JEFFERIES, BENJAMIN E ANDERSEN, STEWART 3391 BAYSIDE LAKES BLVD. SE 4087 US HWY. 1

PALM BAY, FL 32909 US SUITE 3
ROCKLEDGE, FL 32955 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.

CIONATURE CTEMART ANDEROEN

SIGNATURE: STEWART ANDERSEN 05/18/2006

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

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

 Name:
 JEFFERIES, BENJAMIN E
 Name:
 ROWELL, SHAWN

 Address:
 3391 BAYSIDE LAKES BLVD. SE
 Address:
 4087 US HWY. 1, SUITE 3

 City-St-Zip:
 PALM BAY, FL 32909
 City-St-Zip:
 ROCKLEDGE, FL 32955

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

 Name:
 GOATLEY, COLEMAN
 Name:
 GANGWISCH, EDWARD

 Address:
 3391 BAYSIDE LAKES BLVD. SE
 Address:
 4085 US HWY. 1, SUITE 3

 City-St-Zip:
 PALM BAY, FL 32909
 City-St-Zip:
 ROCKLEDGE, FL 32955

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

 Name:
 THOMPSON, RONALD
 Name:
 ANDERSEN, STEWART

 Address:
 3391 BAYSIDE LAKES BLVD. SE
 Address:
 4087 US HWY. 1, SUITE 3

 City-St-Zip:
 PALM BAY, FL 32909
 City-St-Zip:
 ROCKLEDGE, FL 32955

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

 Name:
 Name:
 LEWIS, TREVOR

 Address:
 Address:
 4087 US HWY. 1, SUITE 3

 City-St-Zip:
 City-St-Zip:
 ROCKLEDGE, FL 32955

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

 Name:
 Name:
 MCEWEN, CHARLOTTE

 Address:
 Address:
 4087 US HWY.1, SUITE 3

 City-St-Zip:
 City-St-Zip:
 ROCKLEDGE, FL 32955

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: STEWART ANDERSEN STD 05/18/2006

Electronic Signature of Signing Officer or Director

Date