## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000011242

FILED Mar 12, 2009 Secretary of State

Entity Name: STONEBRIDGE COMMONS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6302 DUCADOS POINTE ORLANDO, FL 32835 **Current Mailing Address: New Mailing Address:** 396 ALHAMBRA CIRCLE 6302 DUCADOS POINTE #230 ORLANDO, FL 32835 US CORAL GABLES, FL 33134 FEI Number: 34-2027687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: THE LAW OFFICES OF JOHN L. DIMASI, P.A. KATZMAN GARFINKLE, P.A. 801 N ORANGE AVENUE, #500 1501 NORTHWEST 49TH STREET ORLANDO, FL 32801 SUITE 202 FORT LAUDERDALE, FL 33309 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: LEIGH C. KATZMAN, ESQ. 03/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MITCHAM, KEITH Name: Name: 2896 POLVADERO LANE #103 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition LINUS, EUGENE Name: JACKSON, SARAH Name: Address: 6336 CASTELVEN DR #102 Address: 2576 SAN TECLA STREET #101 City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835 Title: () Delete Title: () Change () Addition COWART, APRIL Name: Name: 6397 MIRAMONTE DR #102 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ( ) Delete (X) Change ( ) Addition Title: Title: ROSENSTEIN, ALLISON Name: Name: ZIMAND, JULES Address: 6434 CAVA ALTA DR #302 Address: 6434 CAVA ALTA DRIVE #102 City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819 Title: () Delete Title: () Change () Addition RUCKER, JAN Name: Name: 6462 CANTUA LN #109 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

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: KEITH MITCHAM P 03/12/2009