

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011767

FILED
Feb 16, 2010
Secretary of State

Entity Name: VILLAGES OF STONEYBROOK COMMONS ASSOCIATION, INC.

Current Principal Place of Business:

C/O TROPICAL ISLES MGMT SRVS., INC
12734 KENWOOD LANE, SUITE 49
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

C/O TROPICAL ISLES MGMT SRVS., INC
12734 KENWOOD LANE, SUITE 49
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 51-0532583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
FT MYERS, FL 33901 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: P
Name: BONDAY, BARBARA
Address: 7650 BAY LAKE DRIVE
City-St-Zip: FORT MYERS, FL 33907 US

Title: VP
Name: FELLOW, REID
Address: 9400 IVY BROOK RUN
City-St-Zip: FORT MYERS, FL 33913 US

Title: ASM
Name: ROEDDING, JEANNE
Address: 12734 KENWOOD LANE, SUITE 49
City-St-Zip: FORT MYERS, FL 33907 US

Title: ST
Name: DEAN, RJ
Address: 12000 RAIN BROOK RUN
City-St-Zip: FORT MYERS, FL 33913 US

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: BARBARA BONDAY

P

02/16/2010

Electronic Signature of Signing Officer or Director

Date