

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006127

FILED
Feb 12, 2009
Secretary of State

Entity Name: STILLWATER PRESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

504 NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935

New Principal Place of Business:

1608 SUNNY BROOK LANE NE E107
PALM BAY, FL 32905

Current Mailing Address:

1608 SUNNY BROOK LN
E107
PALM BAY, FL 32905

New Mailing Address:

1608 SUNNY BROOK LANE NE E107
PALM BAY, FL 32905

FEI Number: 20-3077989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C. DOUGLAS ENGLE
504 NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

ENGLE, DOUGLAS PD
620 MALABAR ROAD SE UNIT #4
PALM BAY, FL 32907 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: C. DOUGLAS ENGLE

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: C. DOUGLAS ENGLE,
Address: 504 NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: VD () Delete
Name: MORGAN, STEVE
Address: 504 NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: STD () Delete
Name: ENGLE, JASON
Address: 504 NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: C. DOUGLAS ENGLE,
Address: 620 MALABAR ROAD SE UNIT #4
City-St-Zip: PALM BAY, FL 32907

Title: SD (X) Change () Addition
Name: MORRIS, JOHN
Address: 235 WEST DRIVE
City-St-Zip: W. MELBOURNE, FL 32904

Title: TD (X) Change () Addition
Name: CLEVINGER, JAMES
Address: 10151 UNIVERSITY BLVD. #314
City-St-Zip: ORLANDO, FL 32817

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: C. DOUGLAS ENGLE

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date