

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006213

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** STONEWOOD CROSSING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

231 RUBY AVE  
SUITE A  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

231 RUBY AVENUE  
SUITE A  
KISSIMMEE, FL 34741

**New Mailing Address:**

PO BOX 452847  
KISSIMMEE, FL 34745

**FEI Number:** 20-3029915

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC.  
231 RUBY AVE  
SUITE A  
KISSIMMEE, FL 34741 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 ( ) Delete  
Name: BERRYHILL, WILLIAM  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP ( ) Delete  
Name: ROUSCH, WILLIAM  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD ( ) Delete  
Name: WALZ, LARRY  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TOM, PRIOR  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP (X) Change ( ) Addition  
Name: GEORGE, FRIEDMAN  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD (X) Change ( ) Addition  
Name: GREENAWALT, TOM  
Address: 955 KELLER ROAD #1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: GEORGE FRIEDMAN

VP

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date