2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# N05000006473

Entity Name: STONE HEDGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4500 STONE HEDGE DR
ORLANDO, FL 32817

New Principal Place of Business:

4500 STONE HEDGE DR
ORLANDO, FL 32817 US

Current Mailing Address:

4516 STONE HEDGE DR
ORLANDO, FL 32817

New Mailing Address:

4516 STONE HEDGE DR
ORLANDO, FL 32817 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA CASTLE BUILDERS, INC.
107 ST. JOHNS LANDING DRIVE
WINTER SPRINGS, FL 32765 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: DP ( ) Delete
Name: NAVARRO, ALEXANDER
Address: 4500 STONE HEDGE
City-St-Zip: ORLANDO, FL 32817

Title: DST ( ) Delete
Name: RUSH, JASON
Address: 101 ST. JOHNS LANDING DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: NAVARRO, ALEXANDER
Address: 4500 STONE HEDGE
City-St-Zip: ORLANDO, FL 32817 US

Title: DST (X) Change ( ) Addition
Name: RUSH, JASON
Address: 101 ST. JOHNS LANDING DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: M ( ) Change (X) Addition
Name: BOURQUE, LISETTE
Address: 4516 STONE HEDGE DR.
City-St-Zip: ORLANDO, FL 32817 US

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: LISETTE BOURQUE M 03/10/2009

Electronic Signature of Signing Officer or Director — Date