

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05428

FILED  
Apr 11, 2009  
Secretary of State

**Entity Name:** STONE ISLAND ESTATES, UNIT ONE, HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1632 HORSESHOE ROAD  
ENTERPRISE, FL 32725 US

**New Principal Place of Business:**

450 SUNSET ROAD  
ENTERPRISE, FL 32725 US

**Current Mailing Address:**

P.O. BOX 4195  
ENTERPRISE, FL 32725 US

**New Mailing Address:**

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

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

MAXWELL, KEVIN  
1632 HORSESHOE ROAD  
ENTERPRISE, FL 32725 US

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

ROTHERMUND, DIANNE  
450 SUNSET ROAD  
ENTERPRISE, FL 32725 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: DIANNE R. ROTHERMUND

04/11/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PP ( ) Delete  
Name: HATHAWAY, DON  
Address: 430 SUNSET RD  
City-St-Zip: ENTERPRISE, FL 32725

Title: PR ( ) Delete  
Name: MORGAN, CINDY  
Address: 1604 HORSESHOE RD  
City-St-Zip: ENTERPRISE, FL 32725

Title: T ( ) Delete  
Name: MAXWELL, KEVIN  
Address: 1632 HORSESHOE ROAD  
City-St-Zip: ENTERPRISE, FL 32725

Title: S ( ) Delete  
Name: BARBER, LYNN  
Address: 1582 PRAIRIE RD  
City-St-Zip: ENTERPRISE, FL 32725

Title: VP ( ) Delete  
Name: WILLIAMS, JOANNE  
Address: P.O. BOX 4195  
City-St-Zip: ENTERPRISE, FL 32725

Title: P ( ) Delete  
Name: BARBER, RODNEY  
Address: 1582 PRAIRIE RD  
City-St-Zip: ENTERPRISE, FL 32725

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

Title: P (X) Change ( ) Addition  
Name: O'KANE, KATHLEEN  
Address: 1460 SHELLMOUND  
City-St-Zip: ENTERPRISE, FL 32725

Title: VP (X) Change ( ) Addition  
Name: MORGAN, CINDY  
Address: 1604 HORSESHOE RD  
City-St-Zip: ENTERPRISE, FL 32725

Title: T (X) Change ( ) Addition  
Name: ROTHERMUND, DIANNE  
Address: 450 SUNSET ROAD  
City-St-Zip: ENTERPRISE, FL 32725

Title: S (X) Change ( ) Addition  
Name: SEUFERT, MARIE  
Address: 399 STONE ISLAND ROAD  
City-St-Zip: ENTERPRISE, FL 32725

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AT (X) Change ( ) Addition  
Name: HOLDER, VERA  
Address: 395 STONE ISLAND ROAD  
City-St-Zip: ENTERPRISE, FL 32725

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: DIANNE R. ROTHERMUND

T

04/11/2009

Electronic Signature of Signing Officer or Director

Date