

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

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04/11/2009

Electronic Signature of Signing Officer or Director

Date