


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000004702	
1. Entity Name STIRLING CENTER 14 CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 719 RODEL COVE LAKE MARY, FL 32746	Mailing Address 719 RODEL COVE LAKE MARY, FL 32746
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03032008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 20-4836197	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent THOMPSON, SCOTT C ESQ. 719 RODEL COVE LAKE MARY, FL 32746
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000937818 05/27/08-80064-016 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SODERSTROM, ROGER W 719 RODEL COVE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUE, ANNE 1120 TOWNPARK AVE. #1032 LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, DELMAS B 719 RODEL COVE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	14/28/08	407 322 6742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		