

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

05-16-2007 90016017 ****61.25
N06000008329

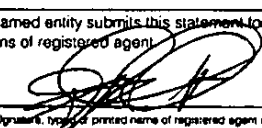
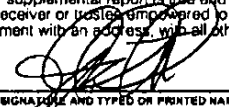
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STATE
ALABAMA, FLORIDA



05012007 Chg-NP CR2E037 (12/06)

DOCUMENT # N06000008329			
1. Entity Name STONEWORK CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1725 S NOVA RD B-11 SOUTH DAYTONA, FL 32119		Mailing Address 1725 S NOVA RD B-11 SOUTH DAYTONA, FL 32119	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-5986659		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		Additional Fee Required \$8.75	
6. Name and Address of Current Registered Agent MCDERMOTT, L.J. 1016 BEL AIRE DR DAYTONA BEACH, FL 32118		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 		DATE 4/30/07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FERNANDEZ, RICHARD W 1725 S NOVA RD B-11 SOUTH DAYTONA, FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	\$76/26 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCDERMOTT, L.J. 1725 S NOVA RD B-11 SOUTH DAYTONA, FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCDERMOTT, LUCILE 1725 S NOVA RD B-11 SOUTH DAYTONA, FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: 		Date 04/30/07 Daytime Phone # 386/4517-0581	