

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21103

FILED
Apr 23, 2009
Secretary of State

Entity Name: STRATFORD COMMONS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

New Principal Place of Business:

24701 US HIGHWAY 19 N SUITE #102
CLEARWATER, FL 33763 US

Current Mailing Address:

P.O. BOX 14357
CLEARWATER, FL 33766 US

New Mailing Address:

FEI Number: 59-2836993 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AMERI-TECH REALTY INC
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

AMERI-TECH REALTY INC
24701 US HIGHWAY 19 N SUITE #102
CLEARWATER, FL 33763 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: MICHAEL G PEREZ, PRESIDENT

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CONWELL, CHRISTOPHER
Address: 3598 EDINGTON WAY
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: BOWEN, CAREY
Address: 4117 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: ALLEN, TINA
Address: 4066 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

Title: SD () Delete
Name: AFFLITO, MICHAEL
Address: 4090 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD () Delete
Name: MCEVERS, VICKIE
Address: 4092 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete
Name: FLOWERS, ANITA
Address: 4052 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KESSLER, LARRY
Address: 4100 DAVENTRY LN
City-St-Zip: PALM HARBOR, FL 34685

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

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

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

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

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: CHRISTOPHER CONWELL

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date