


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 01, 2007 8:00 am**  
**Secretary of State**

02-01-2007 90031 031 \*\*\*\*70.00

<b>DOCUMENT # N27448</b> 1. Entity Name <b>STONEBRIDGE OWNERS' ASSOCIATION, INC.</b>					
Principal Place of Business <b>P O BOX 1456 CRESTVIEW, FL 32539</b>			Mailing Address <b>P O BOX 1456 CRESTVIEW, FL 32539</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>59-2936077</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				01082007    Chg-NP    CR2E037 (12/06)	
6. Name and Address of Current Registered Agent  <b>PRICE, NANCY 2844 OLD MILL WAY CRESTVIEW, FL 32539</b>			7. Name and Address of New Registered Agent Name <b>MARY JAMES</b> Street Address (P.O. Box Number is Not Acceptable) <b>2822 Penney LANE</b> City <b>CRESTVIEW</b> <b>FL</b> Zip Code <b>32539</b>		
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 <u>MARY JAMES</u> <u>Mary James</u> <u>1-9-07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDM BAUER, RANDY 2857 PENNEY LANE CRESTVIEW, FL 32539	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TOSO, WENDY 2840 PENNEY LANE CRESTVIEW, FL 32539	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JAMES, ROBERT 2822 PENNEY LANE CRESTVIEW, FL 32539	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PRICE, NANCY 2844 OLD MILL WAY CRESTVIEW, FL 32539	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARY JAMES 2822 Penney LANE CRESTVIEW, FL 32539 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD BAUER, GINNY 2857 PENNY LANE CRESTVIEW, FL 32539	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
<b>SIGNATURE: (MARY JAMES) - Mary James</b> <u>1-9-07</u> <u>850-683-9133</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>					

40008433



ATTACHMENT  
40008294  
#N27448

**STONEBRIDGE OWNERS ASSOCIATION Inc.**  
**2006 TREASURES REPORT**


DUES and LATE CHARGES	\$ 9,273.35
BALANCE FROM 2005	\$ <u>1,511.69</u>
TOTAL	\$ 10,785.04
PAID OUT IN 2006	\$ <u>6,495.42</u>
BALANCE IN ACCOUNT	\$ 4,289.62

EXPENCES FOR 2006

LAWN SERVICE	\$ 1,470.00
STREET LIGHTS	\$ 955.21
COUNTY TAXES	\$ 21.02
STATE FILING	\$ 61.25
OFFICE EXPENSES	\$ 484.99
LIABILITY INS. FOR 2007	\$ 825.82
MISC. EXPENSE *	\$ <u>2,677.13</u>
TOTAL	\$ 6,495.42

* REPAIRS ON BRIDGES AND DAM	\$ 1,838.87
* ICE ,WATER AND PIZZA FOR VOLUNTEERS	\$ 107.98
* CHRISTMAS SUPPLIES	\$ 29.96
* DUMPSTERS FOR CLEAN UP	\$ 500.00
* BUSH HOG FOR CLEAN UP	\$ 85.50
* FOR BONDING ( RETURNED TO ACCT. )	\$ <u>114.82</u>
	\$ 2,677.13

WE HAD A GREAT YEAR, 79 HOME OWNERS PAID THERE DUES THIS YEAR AND ONLY 2 LIENS HAD TO BE FILED FOR NON PAYMENT.

THANK YOU  
  
ROBERT L. JAMES