2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28472

FILED Apr 18, 2012 Secretary of State

Entity Name: THE COMMUNITY ASSOCIATION FOR STONEGATE AND MILL RUN, COLLIER COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ABILITY MANAGEMENT. 6736 LONE OAK BLVD NAPLES, FL 34109 US

Current Mailing Address: New Mailing Address:

C/O ABILITY MANAGEMENT. 6736 LONE OAK BLVD NAPLES, FL 34109 US

FEI Number: 59-2909803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIVELY, DENNIS F ABILITY MANAGEMENT, INC. 6736 LONE OAK BLVD NAPLES, FL 34109 US ABILITY MANAGEMENT, INC 6736 LONE OAK BLVD NAPLES, FL 34109 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: DENNIS F LIVELY 04/18/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: VANDERHAYDEN, TERRY Address: 2007 DEERFIELD CIRCLE City-St-Zip: NAPLES, FL 34109 US

Title: T

Name: HACKELMAN, MICHAEL Address: 6761 MILL RUN CIRCLE City-St-Zip: NAPLES, FL 34109 US

Title: VP

Name: BERKINSHAW, BRUCE Address: 6649 STONEGATE DRIVE City-St-Zip: NAPLES, FL 34109 US

Title:

 Name:
 KINNEAR, MARIE

 Address:
 7073 MILL RUN CIRCLE

 City-St-Zip:
 NAPLES, FL 34109 US

Title:

Name: AYCOCK, JOHN

Address: 1908 MANCHESTER CIRCLE City-St-Zip: NAPLES, FL 34109 US

I hereby 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 all other like empowered.

SIGNATURE: DENNIS F LIVELY RA 04/18/2012