# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 17, 2009**
**Secretary of State**

DOCUMENT# N37073

**Entity Name:** STONEGATE HOA, INC.

**Current Principal Place of Business:**

2477 STONEGATE DRIVE
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

2477 STONEGATE DRIVE
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number: 65-0192955** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WESTFAL, ROBERT
2477 STONEGATE DRIVE
WELLINGTON, FL 33414 US

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

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | PD | ( ) Delete |
| Name: | MELLION, STEVE | |
| Address: | 2517 STONEGATE DRIVE | |
| City-St-Zip: | WELLINGTON, FL 33414 | |
| Title: | SD | ( ) Delete |
| Name: | PARIS, PATRICIA | |
| Address: | 2470 STONEGATE DR | |
| City-St-Zip: | WELLINGTON, FL 33414 | |
| Title: | TD | ( ) Delete |
| Name: | WESTFAL, ROBERT | |
| Address: | 2477 STONEGATE DRIVE | |
| City-St-Zip: | WELLINGTON, FL 33414 | |
| Title: | VPD | ( ) Delete |
| Name: | MCENTRE, BRIAN | |
| Address: | 2436 STONEGATE DRIVE | |
| City-St-Zip: | VELLINGTON, FL 33414 | |
| Title: | VPD | ( ) Delete |
| Name: | PETRINO, RAYMOND | |
| Address: | 2332 STONEGATE DR | |
| City-St-Zip: | WELLINGTON, FL 33414 | |
| Title: | VPD | ( ) Delete |
| Name: | UNGER, LARRY | |
| Address: | 2490 SANDSTONE COURT | |
| City-St-Zip: | WELLINGTON, FL 33414 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| 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: | |
| 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: ROBERT WESTFAL TRES 04/17/2009

Electronic Signature of Signing Officer or Director — Date