

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46913

FILED  
Feb 04, 2012  
Secretary of State

**Entity Name:** STONEBRIDGE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

9304 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647 US

**New Principal Place of Business:**

**Current Mailing Address:**

9304 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647 US

**New Mailing Address:**

FEI Number: 59-3134720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALZANO, GIANMARCO  
9304 WELLINGTON PARK CIRCLE  
TAMPA, FL 33647 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: VPD  
Name: THORBERRY, BRUCE  
Address: 9305 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

Title: SD  
Name: RHUDD, DARLA  
Address: 9303 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: GAUVIN, RENNIE  
Address: 9349 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: RENNER, CHERYL  
Address: 9346 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

Title: TD  
Name: KUTASH, BILL  
Address: 9335 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

Title: PD  
Name: SALZAON, GIANMARCO  
Address: 9304 WELLINGTON PARK CIR  
City-St-Zip: TAMPA, FL 33647

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: WILLIAM KUTASH

TD

02/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date