

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000001002

FILED  
Apr 25, 2009  
Secretary of State

**Entity Name:** STALLWORTH PRESERVE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

**FEI Number:** 59-3160654      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GORMELY, TERRY P  
215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 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: DP ( ) Delete  
Name: ANDERSON, RON L  
Address: 2566 INGLESIDE FARMS E  
City-St-Zip: GERMANTOWN, TN 38139 US

Title: DP ( ) Delete  
Name: TERRY, RONALD  
Address: 3034 THE OAKS  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DV ( ) Delete  
Name: LEVY, MARGE  
Address: 6489 ROBBINS RIDGE LN  
City-St-Zip: MEMPHIS, TN 38119 US

Title: DST ( ) Delete  
Name: HARPER, DAVID  
Address: 3015 FREE FERRY  
City-St-Zip: FT SMITH, AR 72903 US

Title: D ( ) Delete  
Name: SALTER, PAUL  
Address: 211 SMYER TERRACE  
City-St-Zip: BIRMINGHAM, AL 35216 US

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

Title: DCP (X) Change ( ) Addition  
Name: ANDERSON, RON L  
Address: 2566 INGLESIDE FARMS E  
City-St-Zip: GERMANTOWN, TN 38139 US

Title: DCP (X) Change ( ) Addition  
Name: TERRY, RONALD  
Address: 3034 THE OAKS  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

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: DAVID HARPER

S

04/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date