

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002008

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: STORRINGTON PLACE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

C/O STERLING PROPERTY SVC  
27180 BAY LANDING DRIVE  
BONITA SPRINGS, FL 34135 US

## New Principal Place of Business:

C/O STERLING PROPERTY SVC  
27180 BAY LANDING DR STE 4  
BONITA SPRINGS, FL 34135 US

## Current Mailing Address:

C/O STERLING PROPERTY SVC  
27180 BAY LANDING DRIVE  
BONITA SPRINGS, FL 34135 US

## New Mailing Address:

C/O STERLING PROPERTY SVC  
27180 BAY LANDING DR STE 4  
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0426815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

O'GORMAN, JOHN  
C/O STERLING PROPERTY SERVICES  
27180 BAY LANDING DRIVE, STE. #4  
BONITA SPRINGS, FL 34135 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: SD ( ) Delete  
Name: QUEEN, SHARON  
Address: 15173 STORRINGTON PL. 3E-201  
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete  
Name: JOHNSON, JEANINE  
Address: 15173 STORRINGTON PLACE E 101  
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete  
Name: MAYS, MARY  
Address: 15221 STORRINGTON PLACE A 100  
City-St-Zip: NAPLES, FL 34110

Title: PD ( ) Delete  
Name: DALY, ROBERT  
Address: 15185 STORRINGTON PLACE D200  
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete  
Name: LALIBERTE, LORENZO  
Address: 15216 STORRINGTON PL #M101  
City-St-Zip: NAPLES, FL 34110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: JOHNSON, JEANINE  
Address: 15173 STORRINGTON PLACE E 101  
City-St-Zip: NAPLES, FL 34110

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 DALY

PD

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date