2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # N93000002021

1. Entity Name
STERLING WOODS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1579 JONATHAN CT LARGO, FL 33770 US	1579 JONATHAN COURT LARGO, FL 33770 US

01072004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3265097
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MAY, CHRISTOPHER J.
1579 JONATHAN COURT
LARGO, FL 33770

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MAY, CHRISTOPHER J.
STREET ADDRESS	1579 JONATHAN COURT
CITY-ST-ZIP	LARGO, FL 33770
TITLE	VPD
NAME	DANIEL, TOM
STREET ADDRESS	1542 JONATHAN COURT
CITY-ST-ZIP	LARGO, FL 33770
TITLE	TD
NAME	SINGLETARY, MAUREEN
STREET ADDRESS	1591 JONATHAN COURT
CITY-ST-ZIP	LARGO, FL 33770
TITLE	S
NAME	HARDESTY, LISA
STREET ADDRESS	1575 JONATHAN COURT
CITY-ST-ZIP	LARGO, FL 33770
TITLE	AS
NAME	FELLOUZIS, MARY
STREET ADDRESS	1551 JONATHAN COURT
CITY-ST-ZIP	LARGO, FL 33770
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/20/04-80079-021 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christopher J. May Christopher J. May 1/12/04 (727) 581-7623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #