

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002021

FILED  
Feb 22, 2009  
Secretary of State

**Entity Name:** STERLING WOODS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1579 JONATHAN CT  
LARGO, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

1579 JONATHAN COURT  
LARGO, FL 33770 US

**New Mailing Address:**

1579 JONATHAN CT  
LARGO, FL 33770 US

**FEI Number:** 59-3265097

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAY, CHRISTOPHER J.  
1579 JONATHAN COURT  
LARGO, FL 33770 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: MAY, CHRISTOPHER J.  
Address: 1579 JONATHAN COURT  
City-St-Zip: LARGO, FL 33770

Title: TD ( ) Delete  
Name: SINGLETARY, MAUREEN  
Address: 1591 JONATHAN COURT  
City-St-Zip: LARGO, FL 33770

Title: S ( ) Delete  
Name: HARDESTY, LISA  
Address: 1575 JONATHAN COURT  
City-St-Zip: LARGO, FL 33770

Title: AS ( ) Delete  
Name: FELLOUZIS, MARY  
Address: 1551 JONATHAN COURT  
City-St-Zip: LARGO, FL 33770

**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:

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: CHRISTOPHER J. MAY

PD

02/22/2009

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

\_\_\_\_\_  
Date