

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90312 028 ****61.25

DOCUMENT # N95000000334					
1. Entity Name STONEYBROOK CLUBSIDE SOUTH ASSOCIATION, INC.					
Principal Place of Business 9031 TOWN CENTER PKWY BRADENTON, FL 34202			Mailing Address 9031 TOWN CENTER PKWY BRADENTON, FL 34202		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-0557780				Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WILSON, DOUGLAS E. C/O ADVANCED MANAGEMENT, INC. 9031 TOWN CENTER PARKWAY BRADENTON, FL 34202			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE Treasurer	NAME EASTON, MICHAEL		TITLE Secretary	NAME Larry Leibowitz	
STREET ADDRESS 9630 CLUB SOUTH CIRCLE, #6204	CITY-ST-ZIP SARASOTA, FL 34238		STREET ADDRESS 9610 Club South Circle #4205	CITY-ST-ZIP Sarasota, FL 34238	
TITLE Secretary	NAME LEIBOWITZ, LARRY		TITLE Director	NAME John Orletsky	
STREET ADDRESS 4419 SAMOSET DRIVE	CITY-ST-ZIP SARASOTA, FL 34241		STREET ADDRESS 9620 Club South Circle #5207	CITY-ST-ZIP Sarasota, FL 34238	
TITLE VP	NAME CONNER, DALES		TITLE Director	NAME Jack Calabrese	
STREET ADDRESS 9610 CLUB S CIRCLE #4206	CITY-ST-ZIP SARASOTA, FL 34238		STREET ADDRESS 9620 Club South Circle #5210	CITY-ST-ZIP Sarasota, FL 34238	
TITLE T	NAME LYKER, LUKE		TITLE Director	NAME POTTER, RUS	
STREET ADDRESS 9630 CLUB S. CIRCLE # 6202	CITY-ST-ZIP SARASOTA, FL 34238		STREET ADDRESS 9208 CLUB SOUTH CIRCLE	CITY-ST-ZIP SARASOTA, FL 34238	
TITLE Director	NAME DURANT, HAROLD		TITLE President	NAME DURANT, HAROLD	
STREET ADDRESS 9610 CLUBSOUTH CIRCLE #4310	CITY-ST-ZIP SARASOTA, FL 34238		STREET ADDRESS 9610 CLUBSOUTH CIRCLE #4310	CITY-ST-ZIP SARASOTA, FL 34238	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>[Signature]</i> as agent 3/31/06					
SIGNATURE AND EXEMPTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					