2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003287

FILED Feb 19, 2009 Secretary of State

Entity Name: STONEYBROOK VERANDA GREENS I ASSOCATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY ST. SARASOTA, FL 34231				PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY STREET - FL. 1 SARASOTA, FL 34231			
Current Mailing Address:				New Mailing Address:			
PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY ST. SARASOTA, FL 34231				PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY STREET - FL. 1 SARASOTA, FL 34231			
FEI Number:	65-0602535	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY ST SARASOTA, FL 34231 US				PROGRESSIVE COMMUNITY MGMT., INC. 1801 GLENGARY STREET - FL. 1 SARASOTA, FL 34231 US			
The above in the State	of Florida. E:	submits this statement for the pu	·	f changing it	ts registered o	02/19/2009	agent, or both,
	Electron	ic Signature of Registered Ager	ΠŢ			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VPD () MYERS, KENNE 9540 HIGH GAT SARASOTA, FL	E DR, # 1421		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () FRICKE, RON 9540 HIGH GAT SARASOTA, FL			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	STD () MCCOLLUM, JO 9560 HIGH GAT SARASOTA, FL	E DR., #1613		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	AS () MARKEL, JIM 1801 GLENGAR SARASOTA, FL			Title: Name: Address: City-St-Zip:	MARKEL, JIM) Change()Addition RY STREET - FL. 1 . 34231	
Title: Name: Address: City-St-Zip:	AT () SUTTON, WILLI 1801 GLENGAR SARASOTA, FL	RY ST.		Title: Name: Address: City-St-Zip:	SUTTON, WILL	RY STREET - FL. 1	
Title: Name: Address: City-St-Zip:	CROWLEY, MIC	E DRIVE, #1426		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: JIM MARKEL AS 02/19/2009