2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

N96000002264 DOCUMENT

1. Entity Name

STONEGATE AT WINDSOR HOMEOWNERS! ASSOCIATION IN



FILED Mar 19, 2003 8:00 am Secretary of State

03-19-2003 90181 015 ****61 25

C.	
Principal Place of Business	Mailing Address
444 WEST NEW ENGLAND AVENUE B	444 WEST NEW ENGLAND AVENUE B
WINTER PARK FL 32789	WINTER PARK FL 32789
U\$	US

Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-3528238 Applied For nted Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAVIS, KEVIN M. Street Address (P.O. Box Number is Not Acceptable) 444 WEST NEW ENGLAND AVENUE WINTER PARK FL 32789 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE D Change Addition RUIZ, ADALBERTO 2272 BLUE SAPPHRE CIRCLE WOODS, LANE S NAME NAME STREET ADDRESS 2281 BLUE SAPPHIRE CIRCLE STREET ADDRESS 2272 CITY-ST-ZIP ORLANDO FL 32837 CITY-ST-ZIP OKLANDO, FL Delete TITLE ☐ Change Addition TITLE REX, Mark NAME JOHNSON, TANYA NAME 2446 Sapier Court STREET ADDRESS 2253 BLUE SAPPHIRE CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32837 Orlando, FL VPD Change TITLE ☐ Delete TITLE ☐ Addition WRIGHT, JODE WRIGHT, JODI 2256 BLUE SAPPHRE CIR. NAME NAME STREET ADDRESS 2256 BLUE SAPPHIRE CIRCLE STREET ADDRESS DRLANDO IFL 32837 CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32837 TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition GREENE, PETER NAME NAME STREET ADDRESS 2433 SAPIER CT. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32837 CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change RADICE, EUGENE 2273 BLUE SAPPHIRE CIRCLE NAME CARR: EDITH NAME STREET ADDRESS 2318 BLUE SAPPHIRE CIR. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32837 CITY-ST-ZIP ORLANDO R 32837 **VD** TITLE ☐ Delete TITLE Change Addition WOODS, MICHELLE WOODS, MICHAELA NAME NAME 2281 BLUE SAPPHIRE CIR. STREET ADDRESS 2281 BLUE SAPPHIRE CIR. STREET ADDRESS ORLANDO, FL CITY-ST-ZIP CITY-ST-ZIP 32837 ORLANDO FL 32837

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: