


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90180 006 ****61.25

DOCUMENT # N96000003327

1. Entity Name
STONEBROOK VERANDA GREENS NORTH II ASSOCIATION, INC.



Principal Place of Business
**PROGRESSIVE COMMUNITY MGMT INC
 1801 GLENGARY STREET
 SARASOTA, FL 34231**

Mailing Address
**PROGRESSIVE COMMUNITY MGMT INC
 1801 GLENGARY STREET
 SARASOTA, FL 34231**

2. Principal Place of Business
 Suite, Apt. #, etc.


3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

40003377



02022006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0686942

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PROGRESSIVE COMMUNITY MGMT, INC
 1801 GLENGARY ST.
 SARASOTA, FL 34231**

7. Name and Address of New Registered Agent

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 _____ 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, 2006

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DONAHUE, JACK <input checked="" type="checkbox"/> Delete 4649 CHAPEL HILL DRIVE UNIT #2826 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAWRENCE, KATHLEEN <input checked="" type="checkbox"/> Delete 4639 CHAPEL HILL DRIVE, # 2913 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GREEN, MELVIN <input checked="" type="checkbox"/> Delete 9499 MILLBANKS DR., #2725 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARKEL, JIM <input type="checkbox"/> Delete 1801 GLENGARY ST SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SUTTON, WILLIAM <input type="checkbox"/> Delete 1801 GLENGARY STREET SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOLM, HEINE MR <input checked="" type="checkbox"/> Delete 4649 CHAPEL HILL DRIVE, UNIT #2824 SARASOTA, FL 34238

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CIATTO, ROBERT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4639 CHAPEL HILL DR., #2916 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KAPLAN, ROBERT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4649 CHAPEL HILL DR., #2813 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HOFFMAN, JOAN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9499 MILLBANKS DR., #2726 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WEAVER, RICHARD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9499 MILLBANKS DR., #2724 SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Jim MARKEL** 4/17/06 941-921-5393
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #