

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005707

FILED
Apr 14, 2005
Secretary of State

Entity Name: STONEBRIDGE UNIT THREE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2520 STONEBRIDGE DR
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

2520 STONEBRIDGE DR
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-3419818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERRANO, JENNIFER
2520 STONEBRIDGE DR
JACKSONVILLE, FL 32223 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: P () Delete
Name: MARTINEZ, SUSAN M
Address: 11662 STONEBRIDGE DR N
City-St-Zip: JACKSONVILLE, FL 32223

Title: V () Delete
Name: SERRANO, JENNIFER
Address: 2520 STONEBRIDGE DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SERRANO, JENNIFER
Address: 2520 STONEBRIDGE DR.
City-St-Zip: JACKSONVILLE, FL 32223

Title: V (X) Change () Addition
Name: PACK, RONNIE
Address: 11669 STONEBRIDGE DR. N.
City-St-Zip: JACKSONVILLE, FL 32223

Title: S () Change (X) Addition
Name: GWYN, LARRY H
Address: 11663 STONEBRIDGE DR. N.
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LARRY H. GWYN

SECR

04/14/2005

Electronic Signature of Signing Officer or Director

Date