## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 27, 2008 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # N9600006045  1. Entity Name STONEGATE OWNERS ASSOCIATION, INC.									08-27-200	8 90010 0	944 ****61	.25
Principal Place of Business 4400 NW 36TH AVENUE GAINESVILLE, FL 32606 US			4400	Mailing Address 4400 NW 36TH AVENUE GAINESVILLE, FL 32606 US			: .		•			
2. Principal Place of Business - No P.O. Box # Cornerstons Property Solutions Suite, Apt. #, etc.				3. Mailing Address Cornerstone Property Solution Suite, Apt. #, etc.				07172008	Chg-NP		037 (12/06)	
600 NW 48rd Street #3			Ci	SOO NW 43th St. Suit				4. FEI Numbe	er .		Ar	oplied For
Dainesville, PL Zip Country			<del> </del>	Sairesville, FL Cou			\$9.75 Additional				ot Applicable ditional	
6. Name and Address of Current I				32407 US			Certificate of Status Desired Fee Required  7. Name and Address of New Registered Agent					rdi
		, and Address of Curren	. Negisteri	au Agent		Name						1110
TRIPPE, PAT 4400 NW 36TH AVE GAINESVILLE, FL 32606						Cornerston Property Solutions of North Central FL, LLC Street Address (P.O. Box Nimber is Not Acceptable) 500 NW 43 55. Suite 3						
						Gity .					Zip Çod	le
The above named entity submits this statement for the purpose of changing its register.						16au	<u>າຂວນ</u> າ		h in the State of	Florida Jan	اعڪرور	Γ0
the obligat	ions of regis	stered agent.	<b>7</b> ,00 po.,	oode or ananging i	no regioner	rea onice o	1	C agent, or bot		i i ionda. Tan	iriamina wiii,	and accept
CIONATUO	_	2. H/2			Luga	ene	H,	u) Hev	_	8-20	-08	
SIGNATURE .	Signature, type	d or printed name of registered ager	nt and title if ap	plicable, (N	OTE: Register	ed Agent signat	ture required	when reinstating)		DATE		
D	_			9. Election C Trust Fund				\$5.00 May B Added to Fees	e F		ck payable te artment of S	
10.	ue by Se		IRECTORS	Trust Func		tion.		Added to Fees ADDITIONS/CH	F	lorida Depa	artment of S	tate
10.	VPT	ptember 12, 2008 OFFICERS AND D	IRECTORS	Trust Fund	d Contribu	tion.	Res	Added to Fees  ADDITIONS/CH	ANGES TO OFF	lorida Depa	artment of S	tate
10. TITLE NAME STREET ADDRESS	VPT	ptember 12, 2008	RECTORS	Trust Func	d Contribu 11. TITU NAM	tion.	Resi Pat	Added to Fees  ADDITIONS/CHA  Ident  Ch, Sha  OS NW	ANGES TO OFF	lorida Depa	IRECTORS IN	tate V 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT LINDSTA 13700 NV ALACHU	officers and o	IRECTORS	Trust Fund	11. TITL NAM STR	LE ME REET ADDRESS Y-ST-ZIP	Pesi Pat 1000 Ala	Added to Fees  ADDITIONS/CH  Ident  ch, Sha  S NW (  chua, Fl	ANGES TO OFF	lorida Depa	Artment of Si DIRECTORS IN Change	tate N 10 ☑ Addition
10. TITLE NAME STREET ADDRESS	VPT LINDSTA 13700 NV ALACHU	OFFICERS AND D AD, AAGE W 91 BLVD.	IRECTORS	Trust Func	11. TITU NAM	LE ME LET ADDRESS Y-ST-ZIP LE	Pat Pat 1000 Ala Trea	Added to Fees  ADDITIONS/CHI ident  ch, Sha 05 NW I chua, Fl chua, Fl	ANGES TO OFF	Iorida Depa	IRECTORS IN	tate V 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VPT LINDSTA 13700 N ALACHU P NOFFSIN 13271 N	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE	RECTORS	Trust Fund	11. TITU NAM STR CIT NAM STR STR STR STR	LE ME ST-ZIP LE ME EEET ADDRESS WHE ME EEET ADDRESS ME EEET ADDRESS	Personal Treat Day	Added to Fees  ADDITIONS/CHI ident ch, Sha os Nw ( chua, Fl surer wiels, W OI NW ( OI NW (	ANGES TO OFF WITH Dr 36th Dr 32615 2416	ICERS AND E	Artment of Si DIRECTORS IN Change	tate N 10 ☑ Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	VPT LINDSTA 13700 NV ALACHU P NOFFSIN 13271 NV ALACHU	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615	IRECTORS	Trust Fund	11. TITU NAM STR CITT NAM STR CITT CITT CITT NAM STR	LE ME ME SEET ADDRESS Y-ST-ZIP LE ME	Per Pat 1000 Ala Trea Day 15th Ala	Added to Fees  ADDITIONS/CHI ident ch, Sha 05 NW ( chua, Fl Surer viels, Wo 01 NW ( chua, Kl	ANGES TO OFF ANGES TO OFF 36 Por 326 15 2472 2472 2472 2472 2472 2472 2472 2472 2472 2472	ICERS AND E	artment of Si DIRECTORS IN Change Change	tate  √ 10  Addition  Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VPT LINDSTA 13700 N ALACHU P NOFFSIN 13271 N ALACHU D	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE	IRECTORS	Trust Fund	11. TITU NAM STR CIT NAM STR STR STR STR	LE ME	Resilent Pat 1000 Ala Trea David Ala Sec	Added to Fees  ADDITIONS/CHI ident ident ch, Sha os NW I chua, Fl surer viels, W ol NW I chua, Fl	ANGES TO OFF WITH Dr 32615 DIMPLACE 32615	ICERS AND D	artment of Si DIRECTORS IN Change Change	tate N 10 ☑ Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	VPT LINDSTA 13700 NV ALACHU P NOFFSIN 13271 NV ALACHU D BAGBY, PO BOX-	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE IA, FL 32615  DARRELL 15267	IRECTORS	Trust Fund	d Contribu  11. TITI NAM STR CIT NAM STR CITI NAM STR CITI NAM STR CITI TITI NAM STR	LE ME	Personal Part 1000 Ala Trea Dar Ala Sec Four 1300	Added to Fees  ADDITIONS/CH. ident ch, Sha os Nw chua, Fl surer viels, Wo chua, Fl chua, Fl chua, Fl retan, st, Vergil ios Dwa	ANGES TO OFF JUNDY JOHN DY JOHN DY ALLENS SALE 15	ICERS AND E	artment of Si	tate  √ 10  Addition  Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT LINDSTA 13700 NV ALACHU P NOFFSIN 13271 NV ALACHU D BAGBY, PO BOX- GAINESV	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE IA, FL 32615  DARRELL	IRECTORS	Trust Func	d Contribu  11. TITE NAM STR CIT NAM STR CIT TITE NAM STR CIT TITE NAM STR CIT TITE NAM CIT TIT TITE NAM CIT TIT TIT TIT TIT TIT TIT TIT TIT TIT	LE ME	Resiliant Part 1000 Ala 1574 Ala 5ec Four 1300 Alace	Added to Fees  ADDITIONS/CH ident ch, Sha os NW chua, Fl surer viels, Wo ol NW chua, Fl retan, st, Vergil tos DW chua, Fl	ANGES TO OFF JUNDY JOHN DY JOHN DY ALLENS SALE 15	ICERS AND E	artment of Si DIRECTORS IN Change Change Change	tate  V 10  Solution  Addition  Addition  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	VPT LINDSTA 13700 NV ALACHU P NOFFSIN 13271 NV ALACHU D BAGBY, PO BOX- GAINESV D NOFFSIN	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE IA, FL 32615  DARRELL 15267 VILLE, FL 32604	VIRECTORS	Trust Fund	d Contribu  11. TITI NAM STR CIT NAM STR CITI NAM STR CITI NAM STR CITI TITI NAM STR	LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	Pat 1000 Ala Trea Dav 157 Ala 5ec Fou 1300 Alace	Added to Fees  ADDITIONS/CHI ident ch, Sha os NW chua, Fl surer viels, W OI NW 18 chua, Fl retan, retan, st, Vergil tos DW chua, Fl	ANGES TO OFF ANGES TO OFF 36th Dr 32615 DTP Dace 32615 32615	ICERS AND E	artment of Si	tate  √ 10  Addition  Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VPT LINDSTA 13700 NV ALACHU P NOFFSIN 13271 NV ALACHU D BAGBY, PO BOX- GAINESV D NOFFSIN 13271 NV	OFFICERS AND D  AD, AAGE W 91 BLVD. IA, FL 32615  NGER, KATHY W 93 LANE IA, FL 32615  DARRELL -15267 VILLE, FL 32604  NGER, KATHY W 93RD. LANE	PIRECTORS	Trust Func	d Contribu  11.  TITE NAM STR CIT TITE NAM STR	LE ME	Pat 1000 Ala Trea Day 1574 Ala Fou 1300 Alac Quin	Added to Fees  ADDITIONS/CHI ident ch, Sha os NW chua, Fl surer wiels, W ol NW tetan st, Vergil ios DW chua, Fl chua, Fl retan rett, Raw NW 13c	ANGES TO OFF ANGES TO OFF 36 Dr 32615 Dr Place 32615 32615 32615	ICERS AND E	artment of Si DIRECTORS IN Change Change Change	tate  V 10  Solution  Addition  Addition  Addition
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SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR