N96000006045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STONEGATE OWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N96000006045

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Garry Griffin
Name of Contact Person

Bosshardt Property Management
Firm/Company

5522 NW 43rd St
Address

Gainesville, FL 32653
City/State and Zip Code

customerservice@bosshardtcam.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Garry Griffin at (352) 240-2713
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: STONEGATE OWNERS ASSOCIATION, INC.

2. The principal office address: 5522 NW 43rd Street
Gainesville, FL 32653

3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: 06/01/2025 Document number: N96000006045

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

c/o Guardian Association Managment

10000 SW 52nd Ave - Links Clubhouse

GAINESVILLE, FL 32608

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bosshardt Property Management

5522 NW 43rd Street

P.O. Box NOT acceptable

Gainesville, FL 33487

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TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Barry Griffin

Signature of an officer or director

Garry Griffin

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Barry Griffin

Signature of Registered Agent

06/25/2025

Date

If signing on behalf of an entity:

Typed or Printed Name

*** * * FILING FEE: $35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

DATE: 06.30.2025

ASSOCIATION: Stonegate Owner's

INVOICE# 62025

GL CODE: 07440

CHECK REQUISTION

CHECK AMOUNT $35.00

PAY TO VENDOR Amendment Section Division of Corp

ADDRESS PO Box 6327

CITY / STATE / ZIP Tallahassee, FL 32314

FOR (BUSINESS PURPOSES

CHECK DISTRIBUTION:

GIVE TO NORA

US MAIL

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DROP OFF

SPECIAL INSTRUCTIONS

DUE DATE

APPROVED BY