2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# N97000004781

Entity Name: STONE GABLE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4962 N PALM AVE
WINTER SPRINGS, FL 32792

New Principal Place of Business:

Current Mailing Address:

C/O PREFERRED COMMUNITY MANAGEMENT, INC.
4962 N PALM AVE
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3463955 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRASCA, JOSEPH
C/O PREFERRED COMMUNITY MANAGEMENT, INC.
4962 N PALM AVE
WINTER PARK, FL 32792 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: PD
Name: DOVE, LINWOOD
Address: 136 STONE GABLE CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VD
Name: ROESNER, KEVIN
Address: POST OFFICE BOX 677307
City-St-Zip: ORLANDO, FL 32867

Title: T
Name: ROESNER, CARA
Address: POST OFFICE BOX 677307
City-St-Zip: ORLANDO, FL 32867

Title: D
Name: POOR, JOHN
Address: 164 STONE GABLE CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S
Name: HEATWOLE, DIANNE
Address: 118 STONE GABLE CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby 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 all other like empowered.

SIGNATURE: JOESPH FRASCA MGR 02/16/2011

Electronic Signature of Signing Officer or Director — Date