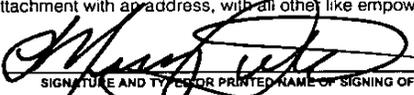


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N98000001222 1. Entity Name STONEYBROOK, A GOLF COURSE COMMUNITY OF FORT MYERS, INC.			FILED 2008 OCT -2 PM 4:43 10-2 8-1 SECRETARY OF STATE TALLAHASSEE, FLORIDA 
Principal Place of Business 1330 RAILHEAD BLVD 4 NAPLES, FL 34110		Mailing Address C/O FAMILY PROPERTY SERVICES 1330 RAILHEAD BLVD STE 4 NAPLES, FL 34110	
2. Principal Place of Business - No P.O. Box # c/o Alliant Property Mgmt, LLC 6719 Winkler Road, Suite 200 Fort Myers, FL 33919		3. Mailing Address c/o Alliant Property Mgmt, LLC 6719 Winkler Road, Suite 200 Fort Myers, FL 33919	
4. FEI Number 65-0839055		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FAMILY PROPERTY SERVICES 1330 RAILHEAD BLVD STE 4 NAPLES, FL 34110		7. Name and Address of New Registered Agent c/o Alliant Property Mgmt, LLC 6719 Winkler Road, Suite 200 Fort Myers, FL 33919	
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  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>9-8-08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		700136618907 10/03/08--01053--010 **\$61.25	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MERRYFIELD, TERRY 21571 BRIXHAM RUN LOOP ESTERO, FL 33928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV REYNOLDS, WILLIAM 21588 WINDHAM RUN ESTERO, FL 33928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PONCHAK, FRANK 21623 BERWICH RUN ESTERO, FL 33928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JONES, QUILL 21609 BRIXHAM RUN LOOP ESTERO, FL 33928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD John Blakeley 21614 Helmsdale Run ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSSI, RAOUL 21497 SHERIDAN RUN ESTERO, FL 33928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHIRL, ANDY 21413 SHERIDAN RUN ESTERO, FL 33928	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:  T.G. Merryfield		Date <u>9/9/08</u> Daytime Phone # <u>239-454-1101</u>	