

2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90323 040 ***150.00

DOCUMENT # P00000095643

1. Entity Name
STONE BROOK APARTMENTS, INC.



Principal Place of Business
415 OAK RIVER DR
PT ORANGE, FL 32127

Mailing Address
415 OAK RIVER DR
PT ORANGE, FL 32127

54046611



DO NOT WRITE IN THIS SPACE

04282004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3675678

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATCHETT, MARGARET M
415 OAK RIVER DRIVE
PT ORANGE, FL 32127

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME PATCHETT, MARGARET M
STREET ADDRESS 415 OAK RIVER DRIVE
CITY-ST-ZIP PORT ORANGE, FL 32127

TITLE D
NAME PATCHETT, STUART L.J.
STREET ADDRESS 415 OAK RIVER DRIVE
CITY-ST-ZIP PORT ORANGE, FL 32127

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, 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: *Margaret M. Patchett*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/28/04 Daytime Phone # 386-788-1335