

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104372

FILED  
Mar 16, 2011  
Secretary of State

Entity Name: STONY CREEK CROSSING, INC.

**Current Principal Place of Business:**

4708 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

4708 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32303 US

**New Mailing Address:**

FEI Number: 59-3756081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANAUSA, DANIEL E  
3520 THOMASVILLE RD  
4TH FLOOR  
TALLAHASSEE, FL 32309 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: D  
Name: GHAZVINI, HOSSEIN  
Address: 4708 CAPITAL CIRCLE NW  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D  
Name: ASBURY, THOMAS B  
Address: 3424 DORCHESTER CT  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: PD  
Name: GHAZVINI, BEHZAD  
Address: 4708 CAPITAL CIRCLE NW  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D  
Name: GHAZVINI, MEHRAN  
Address: 2811 E INDUSTRIAL PLAZA DR  
City-St-Zip: TALLAHASSEE, FL 32301 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOSSEIN GHAZVINI

D

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date