

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021910

FILED
Mar 09, 2005
Secretary of State

Entity Name: STERLING COMMUNITIES, INC.

Current Principal Place of Business:

2700 N. MILITARY TRL
STE 360
BOCA RATON, FL 334316359

New Principal Place of Business:

Current Mailing Address:

2700 N. MILITARY TRL
STE 360
BOCA RATON, FL 334316359

New Mailing Address:

FEI Number: 65-0647055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, ERIC A
6383 NW 6TH WAY
STE 250
FORT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ASFAHL, PAUL W
Address: 3090 CANTERBURY DRIVE
City-St-Zip: BOCA RATON, FL 33434

Title: VP () Delete
Name: ASFAHL, MARY ANN
Address: 3090 CANTERBURY DR
City-St-Zip: BOCA RATON, FL 33434

Title: VP () Delete
Name: NOONAN, DENNIS M
Address: 4831 DORCHESTER MEWS
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP () Delete
Name: GISMONDI, REBECCA
Address: 1600 SABAL PALM DRIVE
City-St-Zip: BOCA RATON, FL 33432

Title: VP () Delete
Name: MONTGOMERY, MATTHEW J
Address: 223 MARBOROUGH RD.
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MONTGOMERY, MATTHEW J
Address: 223 MARLBOROUGH RD.
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DENNIS M. NOONAN

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03/09/2005

Electronic Signature of Signing Officer or Director

Date