

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 14, 2005 8:00 am**  
**Secretary of State**

04-14-2005 90094 022 \*\*\*150.00

DOCUMENT # P98000051346

1. Entity Name  
STONEBROOK REALTY, INC.



Principal Place of Business  
7227 CLINT MOORE ROAD  
BOCA RATON, FL 33496

Mailing Address  
7227 CLINT MOORE ROAD  
BOCA RATON, FL 33496



01192005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0902779

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

LEVINE, JEFFERY A  
4000 NORTH FEDERAL HIGHWAY SUITE 201  
BOCA RATON, FL 33431

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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 REITSMA, RONALD  
STREET ADDRESS 7227 CLINT MOORE ROAD  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE D  
NAME ANSEL, JEROME V  
STREET ADDRESS 7227 CLINT MOORE RD  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*J.V. Ansel*

Date

Daytime Phone #

*4/07/05*