

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63006

FILED
Jan 09, 2009
Secretary of State

Entity Name: STONECREST MANAGEMENT, INC.

Current Principal Place of Business:

11560 SE 176TH PLACE ROAD
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

Current Mailing Address:

11560 SE 176TH PLACE ROAD
SUMMERFIELD, FL 34491 US

New Mailing Address:

FEI Number: 59-3072930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTSON, L H JR.
11560 SE 176TH PLACE ROAD
SUMMERFIELD, FL 34491 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: P () Delete
Name: ROBERTSON, L H
Address: 11560 SE 176TH PLACE ROAD
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: LINEBERRY, CHARLES,
Address: 400 AVINGER LANE SUITE 401
City-St-Zip: DAVIDSON, NC 28031

Title: D () Delete
Name: MAGUIRE, RAY,
Address: 26 S.PENNYLVANIA AVE#200
City-St-Zip: ATLANTIC CITY, NJ 08401 US

Title: D () Delete
Name: BRUCH, DUANE,
Address: 352 CROMPTON STREET
City-St-Zip: CHARLOTTE, NC 28273

Title: D () Delete
Name: HENSON, STEVE
Address: 5353 S. LINDBERG #200
City-St-Zip: ST. LOUIS, MO 63129

Title: D () Delete
Name: SCHWARTZ, SAM,
Address: 2120 E. MAYA PALM DRIVE
City-St-Zip: BOCA RATON, FL 33432

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
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Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: L. HALL ROBERTSON, JR.

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date