

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001470

Entity Name: STILLWATER HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2980 S. MCCALL RD
STE A
ENGLEWOOD, FL 34224**Current Mailing Address:**2980 S. MCCALL RD
STE A
ENGLEWOOD, FL 34224 US**FEI Number:** 65-1036924**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SURFSIDE CAM SERVICES, INC
2980 S. MCCALL RD
STE A
ENGLEWOOD, FL 34224 US*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:** MICHAEL MANNING

04/08/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	FARLOW, LAURIE
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGLEWOOD FL 34224

Title	DIRECTOR
Name	MODENA, JOE
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGLEWOOD FL 34224

Title	SECRETARY
Name	MILNER, GAIL
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGLEWOOD FL 34224

Title	VP
Name	MEAD, JOHN
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGLEWOOD FL 34224

Title	TREASURER
Name	GIBSON, BRAD
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGELWOOD FL 34224

Title	ASST. SECRETARY
Name	MANNING, MICHAEL
Address	2980 S. MCCALL RD STE A
City-State-Zip:	ENGLEWOOD FL 34224

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

SIGNATURE: MICHAEL MANNING**ASSISTANT SECRETARY** 04/08/2018

Electronic Signature of Signing Officer/Director Detail

Date