2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2018
Secretary of State
CC5629267320

DOCUMENT# N04000002556

Entity Name: STONEY CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2121 KILLARNEY WAY
TALLAHASSEE, FL 32309

Current Mailing Address:

POST OFFICE BOX 11143
TALLAHASSEE, FL 32302 US

FEI Number: 20-2639200

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.
2121 KILLARNEY WAY
TALLAHASSEE, FL 32309 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: JOANIE TROTMAN 04/30/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DP
Name	SMITH, EDWARD
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DS
Name	BULLOUGH, ANDREA
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	GARNER, MICHAEL
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DVP
Name	QUINN, ROBERT
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DT
Name	WORRELL, KELLY
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	MANAGING AGENT
Name	FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

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: JOANIE TROTMAN CAM 04/30/2018

Electronic Signature of Signing Officer/Director Detail — Date