

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63006

Entity Name: STONECREST MANAGEMENT, INC.**Current Principal Place of Business:**17350 SE 109TH TERRACE ROAD
SUITE 2
SUMMERFIELD, FL 34491**Current Mailing Address:**4617 COUNTY ROAD 102
OXFORD, FL 34484 US**FEI Number:** 59-3072930**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBERTSON, L H
4617 CR 102
OXFORD, FL 34484 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:** L. H. ROBERTSON

02/15/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	ROBERTSON, L H
Address	4617 CR 102
City-State-Zip:	OXFORD FL 34484

Title	D
Name	MAGUIRE, RAY
Address	26 S.PENNYLVANIA AVE#200
City-State-Zip:	ATLANTIC CITY NJ 08401

Title	D
Name	BRUCH, DUANE
Address	352 CROMPTON STREET
City-State-Zip:	CHARLOTTE NC 28273

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

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

SIGNATURE: HALL ROBERTSON**PRESIDENT**

02/15/2016

Electronic Signature of Signing Officer/Director Detail

Date