

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006696

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: PINEHURST AT STRATFORD PLACE SECTION II RESIDENTS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O INTEGRATED PROPERTY MGMT  
3435 10TH ST N, #201  
NAPLES, FL 34103

**New Principal Place of Business:**

C/O ASSOCIATION CONSULTING & MGMT SERVICES  
1661 TRADE CENTER WAY, SUITE 2  
NAPLES, FL 34109

**Current Mailing Address:**

C/O INTEGRATED PROPERTY MGMT  
3435 10TH ST N, #201  
NAPLES, FL 34103

**New Mailing Address:**

C/O ACMS  
PO BOX 111851  
NAPLES, FL 34108

FEI Number: 20-0298468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAMOUCÉ, ROBERT C  
5405 PARK CENTRAL CT.  
NAPLES, FL 34109 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

**OFFICERS AND DIRECTORS:**

Title: DST ( ) Delete  
Name: GREEN, ERIC  
Address: 964 HAMPTON CIR  
City-St-Zip: NAPLES, FL 34105

Title: DVP ( ) Delete  
Name: DIGIOVANNI, JOHN  
Address: 944 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: DP ( ) Delete  
Name: BOBOWSKI, EDMOND  
Address: 1012 HAMPTON CIR.  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DVP (X) Change ( ) Addition  
Name: MILLAR, SIMON  
Address: 1036 HAMPTON CIR  
City-St-Zip: NAPLES, FL 34105

Title: DST (X) Change ( ) Addition  
Name: DIGIOVANNI, JOHN  
Address: PO BOX 770612  
City-St-Zip: NAPLES, FL 34105

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

SIGNATURE: EDMUND BOBOWSKI

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date