

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2006 8:00 am**  
**Secretary of State**

03-29-2006 90134 013 \*\*\*\*61.25

**DOCUMENT # N96000000817**

1. Entity Name  
**FIELD CLUB COMMUNITY ASSOCIATION, INC.**



Principal Place of Business  
PO BOX 181551  
CASSELBERRY, FL 32718-1551

Mailing Address  
PO BOX 181551  
CASSELBERRY, FL 32718-1551

**50006738**



03262006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**59-3374117**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBIN PASTERNAK  
FIELD CLUB COMMUNITY ASSOC.  
628 FIELD CLUB CIR  
CASSELBERRY, FL 32707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

P

RISNER, TERESA  
633 FIELD CLUB CIR  
CASSELBERRY, FL 32707

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TD

ROBIN PASTERNAK  
628 FIELD CLUB CIR  
CASSELBERRY, FL 32707

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VP

FERNANDEZ, TERRY  
652 FIELD CLUB CIR  
CASSELBERRY, FL 32707

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

S

BROOKS, LEE  
668 FIELD CLUB CIR  
CASSELBERRY, FL 32707

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

Vice President  
Susan Ostrowski  
661 Field Club Cir  
Casselberry FL 32707

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robin Past Robin Pasternak 3-25-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #