# 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000003817

Entity Name: PALM POINTE MASTER ASSOCIATION, INC.

FILED
Aug 30, 2016
Secretary of State
CC2434300278

#### **Current Principal Place of Business:**

4600 EAST MOODY BOULEVARD BUNNELL, FL 32110

## **Current Mailing Address:**

POST OFFICE BOX 350988 PALM COAST, FL 32135 US

FEI Number: 20-2702791 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC. TWO CAMINO DEL MAR PALM COAST, FL 32137 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: FRED ANNON, JR. 08/30/2016

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title DP Title DVP

Name KOLBE, SHANNAN Name GONSALVES, ELAINE

Address POST OFFICE BOX 350988 Address POST OFFICE BOX 350988

City-State-Zip: PALM COAST FL 32135 City-State-Zip: PALM COAST FL 32135

Title DST

Name LOGAN, STEVEN

Address POST OFFICE BOX 350988
City-State-Zip: PALM COAST FL 32135

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: SHANNAN KOLBE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 08/30/2016

Date