

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003817

**Entity Name:** PALM POINTE MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

4600 E. MOODY BLVD.  
BUNNELL, FL 32110

**Current Mailing Address:**

P.O. BOX 350988  
PALM COAST, FL 32135 US

**FEI Number:** 20-2702791

**Certificate of Status Desired:** No

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

SMITH BIGMAN BROCK, PA  
444 SEACREEZE BLVD STE 900  
DAYTONA BEACH, FL 32118 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:** FRANK S. GANZ, ESQ.

02/06/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KOLBE, SHANNAN  
Address        POST OFFICE BOX 350988  
City-State-Zip: PALM COAST FL 32135

Title            SECRETARY, TREASURER  
Name            CAMPBELL, ROBERT R  
Address        P.O. 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

PRESIDENT

02/06/2023

Electronic Signature of Signing Officer/Director Detail

Date