2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07294

Entity Name: WHIPPOORWILL RUN TOWNHOUSES ASSOCIATION, INC.

FILED Dec 15, 2015 Secretary of State CC3843835777

Current Principal Place of Business:

C/O PINNACLE AM LLC 430 NW LAKE WHITNEY PL PORT ST. LUCIE, FL 34986

Current Mailing Address:

C/O PINNACLE AM LLC 430 NW LAKE WHITNEY PL PORT ST. LUCIE, FL 34986 US

FEI Number: 65-0403952 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, EARLE, BONAN & ENSOR, P.A. 789 NW FEDERAL HWY SUITE 101 STUART, FL 34994 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: JACOB ENSOR 12/15/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER**

Name SIME, GREGORY S Name EWAN, MARGARET

C/O PINNACLE AM LLC C/O PINNACLE AM LLC Address Address 430 NW LAKE WHITNEY PL

430 NW LAKE WHITNEY PL

City-State-Zip: PORT ST. LUCIE FL 34986 City-State-Zip: PORT ST. LUCIE FL 34986

Title VP, SECRETARY Title **DIRECTOR**

Name LAWRENCE, MIREILLE Name HEARN, GREGORY A

Address C/O PINNACLE AM LLC Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PL 430 NW LAKE WHITNEY PL

City-State-Zip: PORT ST. LUCIE FL 34986 City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR

BABENZIEN, SUZON Name

Address C/O PINNACLE AM LLC

430 NW LAKE WHITNEY PL

City-State-Zip: PORT ST. LUCIE FL 34986

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.

12/15/2015 SIGNATURE: MARGARET EWAN TREASURER