

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000002810

**Entity Name:** COBBLESTONE ON PALMER RANCH HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Apr 17, 2024**  
**Secretary of State**  
**8241166210CC****Current Principal Place of Business:**8588 POTTER PARK DR  
STE. 500  
SARASOTA, FL 34238**Current Mailing Address:**8588 POTTER PARK DR  
STE. 500  
SARASOTA, FL 34238 US**FEI Number: 47-3522099****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CAPSTONE ASSOCIATION MANAGEMENT  
8588 POTTER PARK DR  
STE. 500  
SARASOTA, FL 34238 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:** CHARLYN CLEMENTS

04/17/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	LAMPERT, JOHANNA
Address	8588 POTTER PARK DR STE. 500
City-State-Zip:	SARASOTA FL 34238

Title	SECRETARY
Name	LALIBERTY, CLARENCE
Address	8588 POTTER PARK DR STE. 500
City-State-Zip:	SARASOTA FL 34238

Title	1ST VP
Name	SCOTT, MICHAEL
Address	8588 POTTER PARK DR STE. 500
City-State-Zip:	SARASOTA FL 34238

Title	2ND VP
Name	FOLTZ, LORRAINE
Address	8588 POTTER PARK DR STE. 500
City-State-Zip:	SARASOTA FL 34238

Title	TREASURER
Name	FAGEN, RICH
Address	8588 POTTER PARK DR STE. 500
City-State-Zip:	SARASOTA FL 34238

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:** JOHANNA LAMPERT

PRESIDENT

04/17/2024

Electronic Signature of Signing Officer/Director Detail

Date