

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30643

**Entity Name:** PRESERVE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

4174 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685

**Current Mailing Address:**

4174 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685

**FEI Number: 59-3048031**

**Certificate of Status Desired: No**

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

NOLAN, JAMES J  
FIRST CHOICE ASSOCIATION MANAGMENT INC.  
4174 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name MCMAHON, LESLIE  
Address 720 BROOKER CREEK BLVD. #206  
City-State-Zip: OLDSMAR FL 34677

Title TD  
Name COFFEY, GEORGE  
Address 720 BROOKER CREEK BLVD. #206  
City-State-Zip: OLDSMAR FL 34677

Title D  
Name BEHAR, MORRIS  
Address 720 BROOKER CREEK BLVD. #206  
City-State-Zip: OLDSMAR FL 34677

Title SD  
Name PEIFFER, PAUL  
Address 720 BROOKER CREEK BLVD. #206  
City-State-Zip: OLDSMAR FL 34677

Title D  
Name WINGATE, KATHLEEN  
Address 720 BROOKER CREEK BLVD.  
SUITE 206  
City-State-Zip: OLDSMAR FL 34677

Title PD  
Name SULLIVAN, DANIEL  
Address 720 BROOKER CREEK BLVD.  
SUITE 206  
City-State-Zip: OLDSMAR FL 34677

Title VD  
Name CIAMPINI, PHIL  
Address 720 BROOKER CREEK BLVD.  
SUITE 206  
City-State-Zip: OLDSMAR FL 34677

*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: DANIEL SULLIVAN**

**PRESIDENT**

**02/09/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date