

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36056

Entity Name: EAGLES POINT COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**PINNACLE COMMUNITY ASSOCIATION MANAGEMENT
3307 CLARK RD #201
SARASOTA, FL 34231**Current Mailing Address:**PINNACLE COMMUNITY ASSOCIATION MANAGEMENT
PO BOX 21058
SARASOTA, FL 34276 US**FEI Number:** 65-0577759**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PINNACLE COMMUNITY ASSOCIATION MANAGEMENT
3307 CLARK RD #201
SARASOTA, FL 34231 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:** HEATHER HAMILTON

04/05/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BLANCO, PAUL
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title TREASURER
Name MEYER, RON
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name PIERCE, RONALD
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name VAUGHAN, FERN
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title SECRETARY
Name COLE, KENNETH
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title VP
Name LUMB, ARTHUR
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

Title DIRECTOR
Name BARNS, DAVID
Address PINNACLE COMMUNITY
 ASSOCIATION MANAGEMENT
 PO BOX 21058
City-State-Zip: SARASOTA FL 34276

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: PAUL BLANCO

PRESIDENT

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Date