

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004798

**FILED  
Feb 26, 2014  
Secretary of State  
CC4338312343**

**Entity Name:** FIELDSTREAM HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O PREMIER COMMUNITY MANAGERS, INC.  
1250 BELLE AVE, SUITE 101  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

C/O PREMIER COMMUNITY MANAGERS, INC.  
1250 BELLE AVE, SUITE 101  
WINTER SPRINGS, FL 32708 US

**FEI Number: 59-3470140**

**Certificate of Status Desired: No**

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

PREMIER COMMUNITY MANAGERS, INC.  
1250 BELLE AVE.  
SUITE 101  
WINTER SPRINGS, FL 32708 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 P  
Name KITTOE, PATRICK  
Address 1250 BELLE AVE., SUITE 101  
City-State-Zip: WINTER SPRINGS FL 32708

Title VP  
Name LUCAS, BONNIE  
Address 1250 BELLE AVE., SUITE 101  
City-State-Zip: WINTER SPRINGS FL 32708

Title S/T  
Name THOMAS, JARED  
Address 1250 BELLE AVE., SUITE 101  
City-State-Zip: WINTER SPRINGS FL 32708

Title D  
Name SAENZ, RICHARD  
Address 1250 BELLE AVE., SUITE 101  
City-State-Zip: WINTER SPRINGS FL 32708

Title D  
Name CURRY, ALFRED  
Address 1250 BELLE AVE., SUITE 101  
City-State-Zip: WINTER SPRINGS FL 32708

*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: PATRICK KITTOE**

**PRESIDENT**

**02/26/2014**

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

\_\_\_\_\_  
Date