

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90056 019 ****61.25

DOCUMENT # 768589

1. Entity Name

GOLF POINTE AT PALM-AIRE COUNTRY CLUB
ASSOCIATION, INC.



Principal Place of Business
9031 TOWN CENTER PKWY
BRADENTON, FL 34202 US

Mailing Address
9031 TOWN CENTER PKWY
BRADENTON, FL 34202 US

40043100



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01232007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

59-2323454

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMI-ADVANCED MANAGEMENT INC.
9031 TOWN CENTER PKWY
BRADENTON, FL 34202

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BALDINGER, STUART
STREET ADDRESS 5581 GLOF POINTE DR
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME LANE, SHIRLEY
STREET ADDRESS 5570 GOLF POINTE DR
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME COTNER, ROY
STREET ADDRESS 5453 GOLF PT DR
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME STONER, HENRY
STREET ADDRESS 7302 GOLF POINTE CIR
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☒ Addition
NAME D. JAN GANZ
STREET ADDRESS 7304 GOLF POINTE CIR.
CITY-ST-ZIP SARASOTA FL 34243

TITLE D ☐ Delete
NAME O'LEARY, DAN
STREET ADDRESS 7260 GOLF POINTE WAY
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME CARMENS, JERRY
STREET ADDRESS 5647 GOLF PT DR
CITY-ST-ZIP SARASOTA, FL 34243

TITLE ☒ Change ☐ Addition
NAME CARMENS, JERRY
STREET ADDRESS 5647 GOLF POINTE DR.
CITY-ST-ZIP SARASOTA, FL. 34243

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #