2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000005888

Apr 08, 2009 Secretary of State

Entity Name: THE PINNACLE AT THE STRAND CONDOMINIUM NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O R & P PROPERTY MANAGEMENT 265 AIRPORT RD SO. NAPLES, FL 341043518 **Current Mailing Address: New Mailing Address:** C/O R & P PROPERTY MANAGEMENT 265 AIRPORT RD SO. NAPLES, FL 341043518 FEI Number: 65-1137268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: R & P PROPERTY MANAGEMENT ASSOC 265 AIRPORT RD SO. NAPLES, FL 341043518 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HEDGES, KEN Name: Name: 6035 PINNACLE LANE #702 Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: Title: () Delete () Change () Addition SASLAVSKY, ARNOLD Name: Name: Address: 6055 PINNACLE LANE, #902 Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: Title: **VPD** (X) Change () Addition () Delete FORD, PAT FORD, PAT Name: Name: 6015 PINNACLE LANE #502 6015 PINNACLE LANE #502 Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110 Title: SD () Delete Title: () Change () Addition Name: ORBEN, MARY ANN Name: 6025 PINNACLE LANE #604 Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: () Delete Title: () Change () Addition FOOTE, BILL Name: Name: 6070 PINNACLE LANE, #1804 Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: () Delete Title: () Change () Addition MCDOUGAL, BOB Name: Name: Address: 6065 PINNACLE LANE, #1003 Address: NAPLES, FL 34110 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KEN HEDGES PD 04/08/2009