

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004120

FILED
Mar 27, 2009
Secretary of State

Entity Name: PINEHURST AT STRATFORD PLACE SECTION I RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ACMS
1661 TRADE CTR WAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

C/O ACMS
PO BOX 111851
NAPLES, FL 34108

New Mailing Address:

FEI Number: 20-0298419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMOUCÉ, ROBERT C
5405 PARK CENTRAL CT.
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: PHIPPS, CHAD
Address: 1248 OXFORD LN.
City-St-Zip: NAPLES, FL 34105

Title: DVP () Delete
Name: ROWAN, VALERIE
Address: 1289 OXFORD LN.
City-St-Zip: NAPLES, FL 34105

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: YACULLO, JACK
Address: 1072 OXFORD LN.
City-St-Zip: NAPLES, FL 34105

Title: DST () Change (X) Addition
Name: RUNDORF, JASON
Address: 1108 OXFORD LN
City-St-Zip: NAPLES, FL 34105

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: CHAD PHIPPS

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date