2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# N03000009602

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

Current Principal Place of Business:

1661 TRADE CTY WAY
#2
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

PO BOX 111851
NAPLES, FL 34108

New Mailing Address:

FEI Number: 20-1036586 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAMOUCE, ROBERT C
5405 PARK CENTRAL COURT
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: PD ( ) Delete
Name: DUNNIGAN, RONNIE
Address: 788 HAMPTON CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DST ( ) Delete
Name: DEVONO, GUY
Address: 851 HAMPTON CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DVP ( ) Delete
Name: CAIN, EILEEN
Address: 831 HAMPTON CIRCLE
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change ( ) Addition
Name: CURATOLO, COURTNEY
Address: 816 HAMPTON CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DV (X) Change ( ) Addition
Name: DEVONO, GUY
Address: 851 HAMPTON CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: DP (X) Change ( ) Addition
Name: CAIN, EILEEN
Address: 831 HAMPTON CIRCLE
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: EILEEN CAIN P 03/26/2009

Electronic Signature of Signing Officer or Director — Date