

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000009602

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**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:**

1926 TRADE CTR WAY  
#2  
NAPLES, FL 34109

**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:**

SAMOUCÉ, 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: DST  
Name: DUNNIGAN, RONNIE  
Address: 788 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: DV  
Name: DEVONO, GUY  
Address: 851 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: DP  
Name: CAIN, EILEEN  
Address: 831 HAMPTON CIRCLE  
City-St-Zip: NAPLES, FL 34105

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: EILEEN CAIN

P

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date