

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006166

FILED
Apr 12, 2007
Secretary of State

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

Current Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT.
3435 10TH STREET N. #201
NAPLES, FL 34103 US

New Principal Place of Business:

C/O ABILITY MANAGEMENT INC
6312 TRAIL BLVD
NAPLES, FL 34108 US

Current Mailing Address:

C/O INTEGRATED PROPERTY MGMT.
3435 10TH STREET N. #201
NAPLES, FL 34103 US

New Mailing Address:

C/O ABILITY MANAGEMENT INC
PO BOX 770278
NAPLES, FL 34107 US

FEI Number: 20-1578736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
PO DRAWER 1507
FORT MYERS, FL 33902 US

Name and Address of New Registered Agent:

LIVELY, DENNIS
6312 TRAIL BLVD
NAPLES, FL 34108 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: DENNIS LIVELY

04/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BOMBARD, CINDY
Address: 1079 ALBANY COURT
City-St-Zip: NAPLES, FL 34105

Title: JD () Delete
Name: CARLO, GENE
Address: 1039 ALBANY COURT
City-St-Zip: NAPLES, FL 34105

Title: DVP () Delete
Name: GONZALEZ, DELPHINE
Address: 1075 ALBANY COURT
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: CARLO, GENE
Address: 1039 ALBANY COURT
City-St-Zip: NAPLES, FL 34105

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CINDY BOMBARD

DP

04/12/2007

Electronic Signature of Signing Officer or Director

Date