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Secretary of State
06-06-2008 90014 027 ****61.25

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000006166

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

66016067

Principal Place of Business	Mailing Address
C/O ABILITY MANAGEMENT INC 6312 TRAIL BLVD NAPLES, FL 34108 US	C/O ABILITY MANAGEMENT INC PO BOX 770278 NAPLES, FL 34107 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1661 Trade Ctr Way	Po Box 111851
Suite, Apt #, etc. 2	Suite, Apt #, etc.
City & State Naples, FL	City & State NAPLES, FL
Zip 34109 Country	Zip 34108 Country

06062008 Chg-NP CR2E037 (12/06)

4. FEI Number 20-1578738 — Applied For / Not Applicable

6. Certificate of Status Desired ☐ $8.75 Additional Fee Required

5. Name and Address of Current Registered Agent
LIVELY, DENNIS
6312 TRAIL BLVD
NAPLES, FL 34108

7. Name and Address of New Registered Agent
Name: Rob Samouce
Street Address (P.O. Box Number is Not Acceptable): 5405 PARK CENTRAL CT
City: NAPLES FL Zip Code 34109

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Rob Samouce 8/21/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

Filing Fee is $61.25 Due by September 13, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: DP NAME: BOMBARD, CINDY STREET ADDRESS: 1079 ALBANY COURT CITY-ST-ZIP: NAPLES, FL 34105	☒ Delete	TITLE: DP NAME: RICHARD SCHAA STREET ADDRESS: 1026 ALBANY CT CITY-ST-ZIP: NAPLES, FL 34105	☐ Change ☒ Addition
TITLE: TD NAME: CARLO, GENE STREET ADDRESS: 1039 ALBANY COURT CITY-ST-ZIP: NAPLES, FL 34105	☐ Delete	TITLE: DVP NAME: DEBORAH WESSMAN STREET ADDRESS: 1022 ALBANY CT CITY-ST-ZIP: NAPLES, FL 34105	☐ Change ☒ Addition
TITLE: DVP NAME: GONZALEZ, DELPHINE STREET ADDRESS: 1075 ALBANY COURT CITY-ST-ZIP: NAPLES, FL 34105	☒ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Schaa 7/22/08 513 505 6728
Signature and typed or printed name of signing officer or director. Date Daytime Phone #