2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State
04-07-2008 90053 011 ****61.25

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1. Entity Name
THE POINTE AT PANTHER RIDGE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2848 PROCTOR RD SARASOTA, FL 34231	2848 PROCTOR RD SARASOTA, FL 34231

DO NOT WRITE IN THIS SPACE

02102008 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0792295
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER MANAGEMENT SVCS, INC
2848 PROCTOR RD
SARASOTA, FL 34231

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LOWE, DANIEL L
STREET ADDRESS	24015 EAST 83RD AVE
CITY-ST-ZIP	MYAKKA, FL 34251
TITLE	STD
NAME	SEMENIUK, DAN
STREET ADDRESS	22265 PANTHER LOOP
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	VD
NAME	GOELZ, T.J.
STREET ADDRESS	8321 245TH STREET EAST
CITY-ST-ZIP	MYAKKA CITY, FL 34251
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Daniel Lowe Daniel Lowe 4-3-08 941/923-5811 x30
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #