


FILE NOW: FILING FEE IS \$61.25

FILED  
May 12, 1999 8:00 am  
Secretary of State

05-12-1999 90007 015 \*\*\*\*61.25

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000004134**

1. Corporation Name

**PINESTONE AT PALMER RANCH NO. 15 CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

435 10TH AVE. W.  
PALMETTO FL 34221

Mailing Address

435 10TH AVE. W.  
PALMETTO FL 34221



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	07/22/1997
22 City & State	27 City & State	4. FEI Number
23 Zip Country	28 Zip Country	65-0774966
24	29	30
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

CONDOMINIUM MGMT INC  
1801 GLENGARY ST  
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MAPES, REED MR	1.2 NAME	
STREET ADDRESS	435 10TH AVE. W.	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WHEALY, THOMAS MR	2.2 NAME	
STREET ADDRESS	248 PALL MALL ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LONDON, ONTARIO N6A 5P6	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPRINKLE, TOM MR	3.2 NAME	
STREET ADDRESS	4255 PLAYERS PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34238	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 ST	
CITY-ST-ZIP		4.4 CITY-	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADD	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

"SEE ATTACHED"

4/8/99

T. Richard Clark  
941-921-5393

CR2E037 (1/98)

**P15****Pinestone At Palmer Ranch No. 15 Condo. Assoc., Inc.**

Page : 1

**Manager LISA****Local Address**

Date Printed:

3/29/99

Code

**P/D****Ms. Mary Kay Holynski**  
8335 Glenrose Way, #1522  
Sarasota, FL 34238546647-90007-15  
#N9200004134  
10**S/D****Mr. Marty Reisky**  
1521 Glenrose Way, #1521  
Sarasota, FL 34238

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**T/D****Ms. Dorothy Prose**  
8335 Glenrose Way, #1510  
Sarasota, FL 34238

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**AS****Mr. P. Richard Clark**  
1801 Glengary Street  
Sarasota, FL 34231

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**AT****Mr. Paul R. Clark, Jr.**  
1801 Glengary Street  
Sarasota, FL 34231

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