

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000009059

Entity Name: ARBOR LAKES ON PALMER RANCH HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 04, 2017
Secretary of State
CC9736469753**Current Principal Place of Business:**551 NORTH CATTLEMEN ROAD
SUITE 200
SARASOTA, FL 34232**Current Mailing Address:**551 NORTH CATTLEMEN ROAD
SUITE 200
SARASOTA, FL 34232 US**FEI Number: 46-3851093****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title VP, SECRETARY, DIRECTOR
Name FULMER, RYAN
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232Title VP
Name LONGENECKER, CAMMIE LARHAE
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232Title VP, TREASURER, DIRECTOR
Name TRUXTON, DAVID
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232Title PRESIDENT, DIRECTOR
Name BURDETT, ANTHONY ("TONY") J.
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232Title EXTERNAL DIRECTOR
Name CIONE, SAM
Address 6327 ANISE DRIVE
City-State-Zip: SARASOTA FL 34238

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: ANTHONY ("TONY") J. BURDETT**PRESIDENT****03/04/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date