# **Officer/Director Detail :**

	Title	D	Title	SECRETARY
	Name	KATHMAN, DAVID	Name	WAMBOLD, EDWARD
	Address	PINESTONE AT PALMER RANCH 4255 PLAYERS PLACE	Address	PINESTONE AT PALMER RANCH 4255 PLAYERS PLACE
	City-State-Zip:	SARASOTA FL 34238-5522	City-State-Zip:	SARASOTA FL 34238-5522
	Title	VP	Title	Р
	Name	BARRY, THOMAS	Name	HOERNER, ROBERT
	Address	4255 PLAYERS PLACE	Address	4255 PLAYERS PLACE
	City-State-Zip:	SARASOTA FL 34238	City-State-Zip:	SARASOTA FL 34238
	Title	DIRECTOR	Title	DIRECTOR
	Name	LECLAIR, ANDRE'	Name	COITO, SUELLEN
	Address	4255 PLAYERS PLACE C	Address	4255 PLAYERS PLACE
			City-State-Zip:	SARASOTA FL 34238
	City-State-Zip:	SARASOTA FL 34238-5522		
	Title	TREASURER		
	Name	O'HEIR-KEIR, SANDRA		
	Address	PINESTONE AT PALMER RANCH 4255 PLAYERS PLACE		

# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9500003567

### Entity Name: PINESTONE AT PALMER RANCH ASSOCIATION, INC.

### **Current Principal Place of Business:**

PINESTONE AT PALMER RANCH 4255 PLAYERS PLACE SARASOTA, FL 34238-5522

## **Current Mailing Address:**

PINESTONE AT PALMER RANCH 4255 PLAYERS PLACE SARASOTA, FL 34238-5522 US

### FEI Number: 65-0611918

### Name and Address of Current Registered Agent:

MCCLENATHEN, CHAD ESQ. 783 S ORANGE AVE STE 210 SARASOTA, FL 34236-4702 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

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.

PRESIDENT

#### SIGNATURE: ROBERT HOERNER

City-State-Zip: SARASOTA FL 34238-5522

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 09, 2015 Secretary of State CC7709881764

Certificate of Status Desired: No

Date