

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004163

Entity Name: PALM POINTE/PALM ISLES HOMEOWNERS ASSOCIATION, INC.**FILED**
Apr 26, 2018
Secretary of State
CC9995893065**Current Principal Place of Business:**ADVANTAGE PROPERTY MANAGEMENT
1111 SE FEDERAL HIGHWAY, SUITE 100
STUART, FL 34994**Current Mailing Address:**ADVANTAGE PROPERTY MANAGEMENT
1111 SE FEDERAL HIGHWAY, SUITE 100
STUART, FL 34994 US**FEI Number:** 65-0645600**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORNETT, JANE L
BECKER & POLIAKOFF
401 E. OSCEOLA STREET
STUART, FL 34994 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	P
Name	GIANNETTI, DENNIS
Address	ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HIGHWAY, SUITE 100
City-State-Zip:	STUART FL 34994

Title	T
Name	BROWN, ALICIA
Address	ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HIGHWAY, SUITE 100
City-State-Zip:	STUART FL 34994

Title	S
Name	SANDERS, KELLY
Address	ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HIGHWAY, SUITE 100
City-State-Zip:	STUART FL 34994

Title	VP
Name	BINSBACHAR, HENRY
Address	ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HIGHWAY, SUITE 100
City-State-Zip:	STUART FL 34994

Title	D
Name	FEIERTAG, KEN
Address	ADVANTAGE PROPERTY MANAGEMENT 1111 SE FEDERAL HIGHWAY, SUITE 100
City-State-Zip:	STUART FL 34994

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: DENNIS GIANNETTI**PRESIDENT****04/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date