



## COMMUNITY / TRACT ASSOCIATION UPDATE SHEET

(Please print or type.)

**The President of each Association, or another Officer of such Association designated by the President, shall represent their Member's interest to the Master Association.**

**NAME OF ASSOCIATION** \_\_\_\_\_

**PRESIDENT**

Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

**DESIGNEE** (Who shall be an Officer, please indicate which position is held.)

Vice President       Secretary       Treasurer

Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

**MANAGEMENT COMPANY**

Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

Community Property Manager \_\_\_\_\_

**COMMUNICATION WITHIN COMMUNITY / TRACT**

Website \_\_\_\_\_

Channel for community communication to residents? Email:  Newsletter:  TV:  Other:  \_\_\_\_\_

Name of Community Communication Coordinator: \_\_\_\_\_

(Person who receives Palmer Ranch Quarterly Newsletter and Weekly Bulletin for posting and/or distribution.)

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Signed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Community President)

Please return to **Palmer Ranch Master Property Owners Association**. Fax: (941) 922-1581

Mail: 5589 Marquesas Circle, Suite 201, Sarasota, FL 34233. Email: [tracy@palmerranch.net](mailto:tracy@palmerranch.net).