

**ACCOUNT INFORMATION
NOW ACCOUNT**



4172 ASSN BANKING BRANCH-CFL
PO BOX 30061 TAMPA FL 33630

ACCOUNT TITLE AND ADDRESS

STONEBROOK LANDING HOMEOWNERS ASSOCIATION
d/b/a THE SANCTUARY AT VENICE
C/O PINNACLE COMMUNITY ASSOCIATION MGMT
PO BOX 21058
SARASOTA, FL 34276

ACCOUNT OPEN DATE	ACCOUNT NUMBER	OWNERSHIP TYPE	PRODUCT NAME	INITIAL DEPOSIT
October 29, 2025	505833063	Corporation Tax Classification: ____	1492 ASSOC NOW	

BUSINESS ENTITY INFORMATION

Name:	STONEBROOK LANDING HOMEOWNERS ASSOCIATION d/b/a THE SANCTUARY AT VENICE	Business Filing State:	FL
Address:	3307 CLARK RD STE 201 SARASOTA, FL 34231	Date Established:	March 9, 2017
CELL PHONE NUMBER:	(941)350-1801	Nature of Business:	OTHERATIONS
E-Mail Address:		Resolution Date:	November 4, 2025
Contact Name:	HEATHER HAMILTON	OFAC: Yes	
Contact Title:	Authorized Signer	ChexSystems: Yes	
Contact E-Mail:	heather@pinnaclecam.com	Customer does not engage in Internet Gambling.	

DEFINITIONS. "You," "your," and "account owner" refer to the Customer and the terms "we," "us," and "our" refer to the Bank, CENTENNIAL BANK.

ADDITIONAL TERMS. Consumer Accounts are to be used primarily for personal, family, or household purposes.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

ACKNOWLEDGMENT. By signing this document, you acknowledge that you have opened the type of account designated above. The undersigned certify that all information provided to the Bank is true and accurate. As the account is in the name of a business entity, you acknowledge that you are acting on behalf of the business entity, and with respect to which you have legal authority to transact business. All signers authorize this Bank to make inquiries from any consumer reporting agency, including a check protection service, in connection with this account.

Your signature acknowledges the receipt of the appropriate Account Agreement for the type of account designated above and that you agree to be bound by the Account Agreement. You acknowledge that you have received the following document(s):

- Substitute Check Policy Disclosure
- Funds Availability Policy Disclosure
- Schedule of Fees
- Privacy Policy (if a copy was not previously provided to you)



One Signer Required for Withdrawals

STONEYBROOK LANDING HOMEOWNERS ASSOCIATION d/b/a THE SANCTUARY AT VENICE

eSigned By: HEATHER HAMILTON
Nov 06, 2025 2:42:50 PM EST (Seal)

By: HEATHER HAMILTON Date
Its: Authorized Signer

eSigned By: QUINTIN JACKSON
Nov 06, 2025 3:31:00 PM EST (Seal)

By: QUINTIN THOMAS JACKSON Date
Its: TREASURER

eSigned By: JASON HAMILTON
Nov 06, 2025 2:11:47 PM EST (Seal)

By: JASON J HAMILTON Date
Its: Authorized Signer

eSigned By: STEVE PASEK
Nov 06, 2025 3:49:03 PM EST (Seal)

By: STEVE PASEK Date
Its: PRESIDENT



Signer: HEATHER HAMILTON
Address: NO ADDRESS
NO CITY, FL 00000
Title/Capacity: Authorized Signer

Tax ID Number: _____
Date of Birth: _____
Cell Phone: (941)350-1801
Email Address: heather@pinnaclecam.com

Signer: JASON J HAMILTON
Address: 1304 MUSTANG STREET
NOKOMIS, FL 34275
Title/Capacity: Authorized Signer

Tax ID Number: _____
Date of Birth: _____
Cell Phone: (941)356-8659
Email Address: jason@pinnaclecam.com

Signer: QUINTIN THOMAS JACKSON
Address: 20869 CATTAIL BLVD
VENICE, FL 34292
Title/Capacity: TREASURER

Tax ID Number: _____
Date of Birth: _____
Cell Phone: (970)420-9374
Email Address: quint@sanctuaryvenice.org

Signer: STEVE PASEK
Address: NO CITY, FL 00000
Title/Capacity: PRESIDENT

Tax ID Number: _____
Date of Birth: _____
Cell Phone: (815)735-8635
Email Address: steve@sanctuaryvenice.org

VERIFICATION FOLLOW-UP. _____

TAXPAYER IDENTIFICATION NUMBER (T.I.N.) CERTIFICATION

82-0747510

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined in the instructions for the IRS Form W-9), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature of U.S. person:

Exemptions (see IRS Form W-9 instructions):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

eSigned By: HEATHER HAMILTON
Nov 06, 2025 2:42:50 PM EST

(Seal)

HEATHER HAMILTON

Date

