2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707525

FILED Mar 11, 2008 Secretary of State

Entity Name: GREATER PINE ISLAND WATER ASSOCIATION, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 5281 PINE ISLAND ROAD BOKEELIA, FL 33922 **Current Mailing Address: New Mailing Address:** 5281 PINE ISLAND ROAD BOKEELIA, FL 33922 FEI Number: 59-1115303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THACHER, WILLIAM J 5281 PINE ISLAND ROAD BOKEELIA, FL 33922 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WARD, DENNIS Name: Name: 2272 YORK RD. Address: Address: City-St-Zip: SAINT JAMES CITY, FL 33956 City-St-Zip: Title: () Delete Title: () Change () Addition SANDERS, DANIEL Name: Name: Address: 11647 ISLAND AVENUE Address: City-St-Zip: MATLACHA, FL 33993 City-St-Zip: Title: () Delete Title: TD (X) Change () Addition PRISCILLA, LEWIS HILL, ROBERT Name: Name: 14171 BOKEELIA RD. 2631 BAYSHORE DR Address: Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: MATLACHA, FL 33993 Title: () Delete Title: () Change () Addition Name: DOHME, CHRISTOPHER Name: 5404 MARINA DR Address: Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition GRABOWSKI, TOM JACOBS, WILLIAM Name: Name: 3542 PINE TREE DRIVE 5424 SERENITY COVE Address: Address: SAINT JAMES CITY, FL 33956 City-St-Zip: City-St-Zip: BOKEELIA, FL 33922 Title: () Delete Title: (X) Change () Addition JACOBS, BILL HERRING, CARLYN Name: Name: Address: 5424 SERENITY COVE Address: 4786 WOODSTOCK DR BOKEELIA, FL 33922 SAINT JAMES CITY, FL 33956 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DENNIS WARD PRES 03/11/2008