2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# 707544

Entity Name: PINES OF SARASOTA, INC.

Current Principal Place of Business:

1501 NORTH ORANGE AVE.
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1501 NORTH ORANGE AVE.
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-0700567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OVERTON, JOHN W
1501 N ORANGE AVE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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:

Title:	CD	( ) Delete
Name:	GOLDBERG, ARTHUR	
Address:	3763 GLEN OAKS MANOR DRIVE	
City-St-Zip:	SARASOTA, FL 34232 US	
Title:	SD	( ) Delete
Name:	JACKSON, MARY ALICE	
Address:	457 MAGELLAN DR.	
City-St-Zip:	SARASOTA, FL 34243 US	
Title:	VCD	( ) Delete
Name:	SMITH, CARL	
Address:	2332 AUBREY LANE	
City-St-Zip:	SARASOTA, FL 34231 US	
Title:	TD	( ) Delete
Name:	DAVIDSMEYER, O. HOWARD	
Address:	5159 RIVERWOOD AVE.	
City-St-Zip:	SARASOTA, FL 34231 US	
Title:	P	( ) Delete
Name:	OVERTON, JOHN W	
Address:	1871 COTTONWOOD TRL	
City-St-Zip:	SARASOTA, FL 34232 US	
Title:	A	( ) Delete
Name:	AMARAL, NINA	
Address:	4002 CROCKERS LAKE BLVD., #112	
City-St-Zip:	SARASOTA, FL 34238 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	JACKSON, MARY ALICE	
Address:	2106 FOUR OAKS LN.	
City-St-Zip:	AUSTIN, TX 78704 US	
Title:	VCD	(X) Change ( ) Addition
Name:	PURMORT, J.R. WELLS	
Address:	7970 N. LEEWYNN DR.	
City-St-Zip:	SARASOTA, FL 34240 US	
Title:	TD	(X) Change ( ) Addition
Name:	DAVIDSMEYER, O. HOWARD	
Address:	5250 MANZ PL, #116	
City-St-Zip:	SARASOTA, FL 34232 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN W. OVERTON P 01/09/2007

Electronic Signature of Signing Officer or Director — Date