2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jan 21, 2003 8:00 am DOCUMENT # 720215 **Secretary of State** 01-21-2003 90098 006 ****61.25 PINE ACRES CIVIC ASSOC., INC. Principal Place of Business Mailing Address 6649 BERNADEAN BLVD 6649 BERNADEAN BLVD **PUNTA GORDA FL 33982** PUNTA GORDA FL 33982 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2341403 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П .Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KALMAN, JUDITH Street Address (P.O. Box Number is Not Acceptable) 1821 JUDITH LANE **PUNTA GORDA FL 33982** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing FILE NOW: FEE IS \$61,25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE Delete ☐ Addition WACHTER, DON SANDRA HUMMEL 1800 POLLY COURT Pg. NAME STREET ADDRESS 1834 POLLY COURT STREET ADDRESS CITY-ST-ZIP **PUNTA GORDA FL 33982** CITY-ST-ZIP TITLE Delete TITLE NAME KALMAN, JUDITH STREET ADDRESS 1821 JUDITH LANE STREET ADDRESS CITY-ST-ZIP **PUNTA GORDA FL 33982** CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NOLEN, JEAN M NAME STREET ADDRESS 1814 BETTY LOU COURT STREET ADDRESS CITY-ST-ZIP **PUNTA GORDA FL 33982** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition THEM, BETTY NAME NAME STREET ADDRESS 6617 JACK STREET STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33982 CITY-ST-ZIP Delete TITLE Change FARNSWORTH, ROBERT ☐ Addition NAME STREET ADDRESS 6510 JACK STREET STREET ADDRESS CITY-ST-ZIP PUNTA GORDA FL 33982 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change □ Addition NAME KAZMARK, RAY STREET ADDRESS 1800 KEITH SRIVE STREET ADDRESS

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

PUNTA GORDA FL 33982

FILED