2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722873

FILED Mar 16, 2006 Secretary of State

Entity Name: PINE BAY ESTATES HOMEOWNERS ASSOCIATON, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
5745 S.W. CORAL G	118TH ST. ABLES, FL 331	56		
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
	118TH ST. ABLES, FL 331	56		
FEI Number	59-2192749	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
11801 S.W CORAL G. The above in the State	e of Florida.	56 US	ourpose of changing its register	red office or registered agent, or both,
SIGNATUI		c Signature of Registered Age	ent	 Date
SIGNATUI OFFICER:		c Signature of Registered Age		Date GES TO OFFICERS AND DIRECTOR
	Electroni	TORS:		
OFFICER: Title: Name: Address:	Electroni S AND DIRECT DP () RUBIN, TAD 5745 SW 118 S' CORAL GABLES	TORS: Delete T. S, FL 33156 Delete JA I STREET	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	DP () RUBIN, TAD 5745 SW 118 S' CORAL GABLES DS () MEANS, KABRIN 5841 SW 116TH CORAL GABLES	TORS: Delete T. S, FL 33156 Delete IA I STREET S, FL 33156 Delete ETTE H STREET	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Electroni S AND DIRECT DP () RUBIN, TAD 5745 SW 118 S' CORAL GABLES DS () MEANS, KABRIN 5841 SW 116TH CORAL GABLES DAS () SEIDEL, CHARL 5880 S.W. 117T CORAL GABLES	TORS: Delete T. S, FL 33156 Delete JA I STREET S, FL 33156 Delete ETTE H STREET S, FL 33156 Delete Delete DRTON H CT.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition

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: MORTON B. BLUMBERG DT 03/16/2006