2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722873

FILED May 21, 2009 Secretary of State

Entity Name: PINE BAY ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5885 SW 118 ST 5745 SW 118 ST

CORAL GABLES, FL 33156 CORAL GABLES, FL 33156

Current Mailing Address: New Mailing Address:

5885 SW 118 ST 5745 SW 118 ST

CORAL GABLES, FL 33156 CORAL GABLES, FL 33156

FEI Number: 59-2192749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELGUEZABAL, BERENICE 5920 SW 116TH ST CORAL GABLES, FL 33156

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete RAFFALSKI, PETER RUBIN, HEYWARD T MR Name: Name: 5885 SW 118 ST Address: 5745 SW 118 ST Address:

City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: CORAL GABLES, FL 33156

(X) Change () Addition Title: DS () Delete Title: MEANS, KABRINA Name: MEANS, KABRINA MRS Name:

Address: **5841 SW 116TH STREET** Address: **5841 SW 116TH STREET** City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: CORAL GABLES, FL 33156

Title: DAS () Delete Title: DAS (X) Change () Addition SEIDEL, CHARLETTE SEIDEL, CHARLETTE MRS Name: Name: Address: 5880 S.W. 117TH STREET Address: 5880 S.W. 117TH STREET City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: CORAL GABLES, FL 33156

() Delete Title: DT Title: DT (X) Change () Addition ELGUEZABAL, BERENICE ELGUEZABAL, BERENICE MRS Name: Name: Address: 5920 SW 116TH ST Address: 5920 SW 116TH ST

City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: CORAL GABLES, FL 33156 DVP Title:

Title: () Delete (X) Change () Addition ESCAGEDO, ANA MARIA RAFFALSKI, PETER MR Name: Name: **5745 SW 119TH STREET 5885 SW 118TH STREET** Address: Address: City-St-Zip: CORAL GABLES, FL 33156 City-St-Zip: CORAL GABLES, FL 33156

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: HEYWARD TAD RUBIN DP 05/21/2009