

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723490 (9)

1. Corporation Name
PINEHURST VILLAGE, INC.



Principal Place of Business: **1701 PINEHURST RD. DUNEDIN FL 34698**
Mailing Address: **HARNOUR MANAGEMENT 552 MAIN STREET SAFETY HARBOR FL 34695 US**

3. Date Incorporated or Qualified: **05/24/1972**
3a. Date of Last Report: **01/30/1995**
4. FEI Number: **59-1577811**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21** Suite, Apt. #, etc.: **22** City & State: **23** Zip: **24** Country: **25**
2a. Mailing Address: **26** Suite, Apt. #, etc.: **27** City & State: **28** Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent
**RAYBURN, LAURA
RAYBURN, LERNER & CIANFRONE
1968 BAYSHORE BLVD
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent
81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____ **FL** **85** Zip Code: _____

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when non-filing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HETT, JENNIE	1.2 NAME	
STREET ADDRESS	1701 PINEHURST RD. 7E	1.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOCKREY, TOM	2.2 NAME	
STREET ADDRESS	1701 PINEHURST RD 17C	2.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STENZEL, RUTH	3.2 NAME	
STREET ADDRESS	1701 PINEHURST RD. 6A	3.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	3.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRUM, WILSON	4.2 NAME	
STREET ADDRESS	1701 PINEHURST RD. 11A	4.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIDENOUR, BILL	5.2 NAME	
STREET ADDRESS	1701 PINEHURST RD 8B	5.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORLOCK, CARLA	6.2 NAME	
STREET ADDRESS	1701 PINEHURST RD 24B	6.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL 34698	6.4 CITY-ST-ZIP	

VP+S
PD Roy Rife 1701 Pinehurst Rd. #33-E Dunedin, FL 34698
TD MARY FOSTER 1701 Pinehurst Rd. #26-B Dunedin, FL 34698
D Sunny Simmons 1701 Pinehurst Rd. #28-C Dunedin, FL 34698

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Roy W. Rife** 2/1/96 736 5641
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #

CR2E037 (12/95)

PINEHURST VILLAGE ADDITIONS

D

JAMES KOVACH
1701 PINEHURST RD. #17 C
DUNEDIN, FL 34698

D

BETTY PUCHINSKY
1701 PINEHURST ROAD #18-E
DUNEDIN, FL 34698

D

PAULINE LIENHERT
1701 PINEHURST ROAD # 17-A
DUNEDIN, FL 34698