## FILE NOW: FILING FEE IS \$61.25

2a. Mailing Address

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 723490

1. Corporation Name

2. Principal Place of Business

PINEHURST VILLAGE, INC.

Principal Place of Business 1701 PINEHURST RD. DUNEDIN FL 34698	Mailing Address		
	% COMMUNITY MGT CONCEPT 4175 E. BAY DRIVE SUITE 208 CLEARWATER FL 34624		

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90084 002 \*\*\*\*61.25



Suite, A	.pt. #, etc.	26	<del>-</del>		05/24/1972	•		
22	,	Suite, Apt. #, etc.			4. FEI Number			Applied For
City & S	State	27			<u>59-1577811</u>		<u> </u>	Not Applicable
23	·	City & State			5. Certificate of Status Desired		\$8.75	5 Additional
Zip	Country	Zip	Country	<del></del>			Fee	Required
24	25	29	30		6. Election Campaign Financing	<sup>3</sup> □		O May Be
	9. Name and Address of Currer	it Registered Agent	<del></del>		Trust Fund Contribution		Adde	d to Fees
			81	Name	10. Name and Address of New	Registered	Agent	<del>.</del>
BECKER	& POLIKOFF		نيا					
	IRLING ROAD		82	Street Ad	ddress (P.O. Box Number is Not Accep	table)		
	YSHORE BLVD		83					
FORT LA	UDERDALE FL 33312							
			84	City			85 Zip	Code
11. Pursuar	nt to the provisions of Sections 617.050; registered agent, or both, in the State am familiar with and accept the obliga-	2 and 617.1508. Florida Statute	s the above	named se		FL	1 1 '	· · · · · · · · · · · · · · · · · · ·
agent. I	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was aut	thorized by t	he corpora	progration submits this statement for the	purpose of a	changing it	s registered
SIGNATURE		ions of, Section of 7.0503, Florid	da Statutes.		, , , , , , , , , , , , , , , , , , ,	pr are appear	milent as n	egistered
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE 6	Perintend Asset	-1				ſ
12.	OFFICERS ANI	DIRECTORS	13.	signature requi	ired when reinstating)	DATE		
TITLE	D	☐ DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OF	FICERS AN		
NAME	HETT, JENNIE		1.2 NAME	1			Change	☐ Addition
STREET ADDRESS	1701 PINEHURST RD. 7E		1.3 STREET A	Doncoo				}
CITY-ST-ZIP	DUNEDIN FL 34698					•		1
TITLE	Р	☐ DELETE	1.4 CITY-ST- 2.1 TITLE	ZIP				
NAME	MAYE, FRANK		2.2 NAME				Change	☐ Addition
STREET ADORESS			2.3 STREET A	200544	,			
CITY-ST-ZIP	DUNEDIN FL 34698				<u> </u>			1
TITLE	T	☐ DELETE	2.4 CITY-ST- 3.1 TITLE	ZiP				
NAME	MC CORMICK, JIM		3.2 NAME				Change	☐ Addition
STREET ADDRESS	1701 PINEHURST ROAD, 30B							
CITY-ST-ZIP	DUNEDIN FL 34698		3.3 STREET AL					ſ
ITLE	D	☐ DELĒTE	3.4. CITY-ST-2 4.1 TITLE	ZIP		<u> </u>		
AME	KOVACH, JAMES		4.1 IIILE 4.2 NAME			!	Change	Addition
TREET ADDRESS	1701 PINEHURST ROAD, 31F			DDE04				
ITY-ST-ZIP	DUNEDIN FL 34698		4.3 STREET AL	ſ				1
TILE .	D	☐ DELETE	4.4 CITY-ST-Z	P				
AME	DONLAN, JIM		5.1 IFILE 5.2 NAME	}		[	Change	☐ Addition
	1701 PINEHURST ROAD, 21G		5.3 STREET AD	DBE66				
	DUNEDIN FL 34698	ļ	5.4 CITY-ST-ZI	- 1				
T -	D	☐ DELETE	6.1 T/TLE					
	HESEL, LILLIAN		6.2 NAME	1			Change	☐ Addition
REET ADDRESS	1701 PINEHURST ROAD, 16G	į	6.3 STREET ADI	DESC				İ
TY-ST-ZIP	DUNEDIN EL 34600	i						}
4. I hereby ce	ertify that the information supplied with t	his filing does not qualify for the	examples	^	V 0			)

indicated on this annual report or 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 officer or director of the corporation of 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 chaffiged, or on an attachment with an address, with all other like empowered.

1-727-734-9679