


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90062 031 ****61.25

DOCUMENT # 728661

1. Entity Name
PINE VALLEY RANCHES OWNERS ASSOCIATION, INC.



Principal Place of Business
**1590 FIRST ST.
 SARASOTA, FL 34236**

Mailing Address
**1590 FIRST ST.
 SARASOTA, FL 34236**



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04102005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
59-1547366

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
**GOAR, JAMES C.
 1590 FIRST ST.
 SARASOTA, FL 34236**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
 Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PD	ANDRESON, DAVE	6947 SHOTGUN DRIVE	SARASOTA, FL	<input type="checkbox"/>
SD	TISDALE, BARBARA	6048 SHOTGUN DRIVE	SARASOTA, FL 34240	<input checked="" type="checkbox"/>
TD	GOAR, JAMES C.	1027 RANCHERO DR.	SARASOTA, FL	<input type="checkbox"/>
VD	WILBANKS, KATHRYN	1164 RANCHERO DRIVE	SARASOTA, FL 34240	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
SD	Janice McCullough	1050 Ranchero Dr.	Sarasota FL 34240	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VD	Al Beale	1296 Ranchero Dr.	Sarasota, FL 34240	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James C. Goar **JAMES C. GOAR** 4.10.05 941 366 6380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #