

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

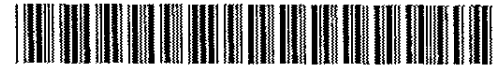
DOCUMENT # 728978

1. Entity Name
THOUSAND PINES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
C/O FRED FURGANG
12824 SW 108 AVE
MIAMI, FL 33176 US

Mailing Address
C/O FRED FURGANG
12824 SW 108 AVE
MIAMI, FL 33176 US



01052007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1708472
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REHR, MICHAEL E ESQ.
9500 SOUTH DADELAND BLVD.
SUITE 550
MIAMI, FL 33156

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IN THIS SPACE**

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME FURGANG, FRED
STREET ADDRESS 12824 SW 108 AVE
CITY-ST-ZIP MIAMI, FL 33176

TITLE SD
NAME MENDEZ, ALEX
STREET ADDRESS 12805 SW 108 AVE
CITY-ST-ZIP MIAMI, FL 33176

TITLE TD
NAME YABLONSKY, JACKIE
STREET ADDRESS 12904 SW 108 AVE
CITY-ST-ZIP MIAMI, FL 33176

TITLE VD
NAME ACOSTA, PABLO
STREET ADDRESS 13105 SW 108 AVE
CITY-ST-ZIP MIAMI, FL 33176

TITLE D
NAME SCHRATTER, RAM
STREET ADDRESS 12824 SW 107CT
CITY-ST-ZIP MIAMI, FL 33176

TITLE D
NAME FISHER, PAUL
STREET ADDRESS 13024 SW 107 CT
CITY-ST-ZIP MIAMI, FL 33176

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01/16/07-80059-018 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Fred A. Furgang FRED A. FURGANG 1-11-2007 305-607-4619