2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# 743975

Entity Name: THE PINES OF CLEARWATER CONDOMINIUM, INC.

Current Principal Place of Business:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-1881045 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
2180 W SR 434
STE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCPHILLIPS, KATHLEEN
Address: 1579 GREENLEA DRIVE, #4
City-St-Zip: CLEARWATER, FL 33755

Title: VPD ( ) Delete
Name: ZIMMERMAN, NORMAN
Address: 3 VIRGINIA AVE
City-St-Zip: JEFFERSONVILLE, IN 47130

Title: SD ( ) Delete
Name: PIERRATT, NAOMI
Address: 1575 GREELLEA DR. #5
City-St-Zip: CLEARWATER, FL 33755

Title: TD ( ) Delete
Name: HEFFLIN, BONNIE
Address: 8028 SOMERSET DR
City-St-Zip: LARGO, FL 33773

Title: D ( ) Delete
Name: WINKLER, THOMAS
Address: 1589 GREENLEA DR #6
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPTD (X) Change ( ) Addition
Name: ZIMMERMAN, NORMAN
Address: 3 VIRGINIA AVE
City-St-Zip: JEFFERSONVILLE, IN 47130

Title: D (X) Change ( ) Addition
Name: PIERRATT, NAOMI
Address: 1575 GREENLEA DR. #5
City-St-Zip: CLEARWATER, FL 33755

Title: SD (X) Change ( ) Addition
Name: HEFFLIN, BONNIE
Address: 1579 GREENLEA DR APT 9
City-St-Zip: CLEARWATER, FL 33755

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN MCPHILLIPS PD 04/28/2006

Electronic Signature of Signing Officer or Director — Date