FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

745127

(1)

PINEWOODS UNIT ONE, INC.

Principal Place of Business	Mailing Address
2460 PINEWOODS CIR.	2460 PINEWOODS CIR.
NAPLES FL 33942	NAPLES FL 34105-2594

FILED Mar 27 1997 8:00am Secretary of State



2460 PINEWOO NAPLES FL 339			2460 PINEWOODS CI NAPLES FL 34105-25							
							3. Date Incorporated or Qualified 12/05/1978	3a. Date of Last 04/01/1	Report 1996	
2. Principal Pl	lace of Busines	s	2a. Mailing Address				4. FEI Number	L	Applied For	
21			26	•			59-2669568		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	1) ,	Additional Required				
City & State City & State 23 28					6. Election Campaign Financing Trust Fund Contribution		May Be d to Fees			
Ζφ		Country	Zip Country				8. This corporation has liability for i		s. 199.032,	
24		25 29 30 ame and Address of Current Registered Agent					Florida Statutes Yes X No 10. Name and Address of New Registered Agent			
	9. Name ar	O Address of Current	Hegistered Agent		81	Name	10. Name and Address of New He	Assessor when		
10110101										
JOHNSON, TERRY P. 800 SEAGATE DR.			83	Street Ad	Address (P.O. Box Number is Not Acceptable)					
,			63							
NAPLES FL 33940			84	City		FL	Code			
office or n	edistered agen	 or both, in the State c 	and 617.1508, Florida S of Florida, Such change vi ions of, Section 617.050	was author	rized by	r the carpor	propration submits this statement for the pration's board of directors. I hereby accept	urpose of changing of the appointment a	its registered is registered	
SIGNATURE _										
	Signor se typed or	printed name of registered agent OFFICERS AND			stered Age 13.	nt signature req	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE PERS AND DIRECTO	7BS IN 12	
12.	PSD	OFFIGERS AND	DELETI		I.1 TITLE		ADDITIONAL TO OTHE	Change		
NAME	WITHAM,	DONNA			I.2 NAME					
STREET ADDRESS		EWOODS CIR.		1	I.3 STREET	ADDRESS			1	
CITY-ST-7IP	NAPLES I			1	I.4 CITY-S	1-719	·			
TITLE	TD		DELET	E 2	1 TITLE			☐ Change	Addition C	
NAME		ENT, PAMELA		2	2.2 NAME					
STREET ADDRESS		EWOODS CIRCLE		2	2.3 STREET	ADDRESS				
CITY-ST-ZIP	NAPLES	<u> </u>			2. 4 CITY -	ST-ZIP		T Observed	A Jelian	
THLE	VD	0.400	DELETI		3.1 TITLE			Change	Addition	
NAME	MURRAY,				3.2 NAME				1	
STREET ADORESS		ewood CIR,				ADDRESS				
CITY+S1-ZIP	NAPLES	<u></u>	DELET		3.4. CITY - 4.1 TITLE	ST - ZIP		Change	e Addition	
THE			OLLU	- 1	4. 1 MAME			L. o.iailik		
NAME STREET ADDRESS				1		ADDRESS	•			
CITY-ST-ZIP					4.4 CITY-9					
TITLE			DELET		51 TITLE), - <u>Z</u> II		Change	e Addition	
NAME				1	52 NAME	1			1	
STREET ADDRESS						ADDRESS				
CHY-ST-ZIP					5 4 CITY - 9	i				
TIFLE			DELET		6 1 TITLE			☐ Change	e 🔲 Addition	
NAME					62 NAME	1			ŀ	
STREET ADDRESS	<u> </u>			[(6.3 STREE	ADDRESS				
CITY ST-ZIF					6.4 CITY-5					
# # 1 ala la acad	L		with this files stone and				ted in Section 110 07(3Vi) Florida Statute	e I further certify th	at the	

4. I do 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 annual report or supplemental 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 13 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jamel S. Municiples (Panela S. HENNENFENT) 3-24-97