2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 21, 2001 8:00 am
Secretary of State
06-21-2001 90001 001 ****61.25

0053455

DOCUMENT # 750352

1. Entity Name

PINETRAIL EAST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
616 NW 45 DR. DELRAY BEACH FL 33445 US	596 N.W. 45TH DRIVE DELRAY BEACH FL 33445

600172030

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVEY, SUSAN 596 N.W. 45TH DRIVE DELRAY BEACH FL 33445	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.

SIGNATURE Susan Davey 6/17/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BYK, DENNIS 616 N.W. 45TH DRIVE DELRAY BEACH FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVEY, TERRY 596 NW 45 DRIVE DELRAY BEACH, FL. 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VASQUEZ, LAURIE 572 N.W. 45TH DRIVE DELRAY BEACH FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KUH, RONALD 604 NW 45 DRIVE DELRAY BEACH, FL. 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DAVEY, SUSAN 596 N.W. 45TH DRIVE DELRAY BEACH FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ARTHBRIDGE, BESSIE 4583 NW 5TH CT DELRAY BEACH, FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DAVEY, JERRY 596 NW 45 DR. DELRAY BEACH FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RANGEL, DOLORES 619 NW 45 DRIVE DELRAY BEACH, FL. 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED TERRY DAVEY PRES. 6/17/01 561-445-0831