

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 02, 2008**  
**Secretary of State**

DOCUMENT# 752653

**Entity Name:** PINEHURST TOWNHOMES CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3717 EDGEWATER DR  
SEBRING, FL 33872 US

**New Principal Place of Business:**

**Current Mailing Address:**

1556 ALLEN LN  
SAINT CHARLES, IL 60174 US

**New Mailing Address:**

**FEI Number:** 59-2122411      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HEGELE, PAUL L  
3717 EDGEWATER DR  
SEBRING, FL 33872 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: STD ( ) Delete  
Name: HEGELE, PAUL  
Address: 1556 ALLEN LN  
City-St-Zip: SAINT CHARLES, IL 60174

Title: PD ( ) Delete  
Name: DORAN, NED  
Address: 3715 EDGEWATER DR  
City-St-Zip: SEBRING, FL 33872

Title: VD ( ) Delete  
Name: HARDIN, CHARLES  
Address: 1072 ANDOVER FOREST DR  
City-St-Zip: LEXINGTON, KY 40509

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PD (X) Change ( ) Addition  
Name: HARDIN, CHARLES  
Address: 1072 ANDOVERFOREST DRIVE  
City-St-Zip: LEXINGTON, KY 40509

Title: VD (X) Change ( ) Addition  
Name: DORAN, NED  
Address: 3715 EDGEWATER DRIVE  
City-St-Zip: SEBRING, FL 33872

I hereby certify that the information supplied with this filing does not qualify 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: PAUL L. HEGELE

STD

01/02/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date