## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR).

SIGNATURE

## Feb 29, 2008 8:00 am **DOCUMENT # 765187 Secretary of State** 1. Entity Name 02-29-2008 90012 024 \*\*\*\*62.00 GOLF PINES POOL ASSOCIATION, INC. Principal Place of Business Mailino Address 1313 SW 16TH TERR UNIT 102 CAPE CORAL FL 33991 1313 SW 16TH TERR UNIT 102 CAPE CORAL FL 33991 2. Principal Place of Business - No P.C. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-2381995 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REID, RUSSELL 1313 SW 16TH TERR **UNIT 102** CAPE CORAL FL 33991 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 crimed name of registered agent and the if applicable (NOTE: Registered Agent signalise registed when reinstating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE Addition Golf Colling ter 201 Change REID, RUSSELL NAME NAME 1313 SW 16TH TERR STREET ADDRESS STREET AUDRESS cape coral FL 33991 CAPE CORAL FL 33991 CITY - ST - ZIP CITY-ST-ZIP VD Tatle Delete TITLE ☐ Change Addition woeman 1313 Swill ter 201 COLLIN, GAIL NAME NAME 1321 SW 16TH TERR # 201 STREET ADDRESS STREET ADDRESS case force fl 35991 CAPE CORAL FL 33991 CITY-ST-ZIP CITY-ST-ZIP 1321 Sus 164-6-7-201 TD Delete TITLE Addition ☐ Change SYLVIA, JUDY " NAME NAME 18100 MORNING STAR LN STREET ADDRESS STREET ADDRESS Cape Doral R 33991 CTTY-ST-ZIP CAPE CORAL FL 33993 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ■ Addition BERNIER, KATHY Kally Bernier NAME NAME 1303 SW 16TH TERR # 102 いい しょうしょ STREET ADDRESS STREET ADDRESS 363 CAPE CORAL FL 33991 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZiP THILE Delete DILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signalure shall have the same legal effect as if made under outh; 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.

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