## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

SIGNATURE AND TYPED OR

## **Secretary of State DOCUMENT #767819** 03-28-2008 90032 030 \*\*\*\*61.25 LAKE PINELOCH VILLAGE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 120 E COLONIAL 1317 LAKE WILLISARA CIRCLE ORLANDO, FL 32801 ORLANDO, FL 32806 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Hillcrest St. Suite, Apt. #, etc. 01032008 CR2E037 (12/06) 4. FEI Number 59-2397637 City & State Applied For Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address-of Current Registered Agent 7. Name and Address of New Registered Agent oital Property FIRST CAPITAL PROPERTY GROUP, INC. 120 E COLONIAL DR ORLANDO, FL 32801 32803 Orlando 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. 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change MLE TITLE Detete Linda Cumbie NAME GREY, JEAN NAME 2933 Monaco Ct. 1115 SALERNO COURT STREET ADDRESS STREET ADDRESS Orlando, FL 32806 CITY-ST-ZIP ORLANDO, FL 32806 CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME SNYDER, RICHARD NAME 1251 LAKE WILLISTARA CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32806 CITY-ST-ZIP TITLE Delete MIE ☐ Change Addition | Ashleigh Bizzelle 1262 St. Tropez Circle IBEN, RICKY NAME NAME 2922 MONACO CT STREET ADDRESS STREET ADDRESS ORLANDO, FL 32806 CITY-ST-ZIP Orlando, FL 32806 CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE David Herner INGERSOLL, KEITH MAME NAME 2904 Monaco Ct. 1106 LAKE WILLISARA CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-76 ORLANDO, FL 32806 CITY-ST-ZIP <u>Orlando Fl</u> Addition TITLE ☐ Delete TITLE ☐ Change GRANT, JOANNE MALIE MAME Dennis Leonard 1243 LAKE WILLISARA CIRCLE 2914 Monaco Ct. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32806 Orlando FL Delete ☐ Change ■ Addition KENT, JOY NAME NAME STREET ADDRESS 1220 ST TROPEZ CIRCLE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ORLANDO, FL 32806 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

FILED

Mar 28, 2008 8:00 am