2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002469

Apr 25, 2008 Secretary of State

Entity Name: PINE LAKE OWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 8009 S ORANGE AVENUE 5955 T.G. LEE BLVD, SUITE 300 ORLANDO, FL 32809 ORLANDO, FL 328224457 **Current Mailing Address: New Mailing Address:** 5955 T.G. LEE BLVD, SUITE 300 ORLANDO, FL 328224457 FEI Number: 57-1154126 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LELAND MANAGEMENT LELAND MANAGEMENT 8009 S. ORANGE AVENUE 5955 T.G. LEE BLVD, SUITE 300 ORLANDO, FL 32809 ORLANDO, FL 328224457 US 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: 04/25/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PETERSON, CATHERINE Name: Name: 1863 CHATHAM VILLAGE DRIVE Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: () Delete Title: () Change () Addition WHITAKER, DONALD Name: Name: Address: 2331 OLD PINE DRIVE Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: Title: STD () Delete Title: STD (X) Change () Addition KIRBY, EDNA Name: TERMER, LESLIE Name: 1805 CROSS PINE DRIVE 1838 WINTER PINES COURT Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 32003 Title: (X) Delete Title: () Change () Addition Name: SHRADER, PRESLEY Name: Address: 2405 OLD PINE TRAIL Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip:

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: CATHERINE PETERSON PD 04/25/2008