## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000007944

FILED Apr 29, 2011 Secretary of State

Entity Name: PINEAPPLE VILLAGE TOWNHOMES NORTH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ALLISON MANAGEMENT SERVICES 325 CLEMATIS ST #202 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

C/O ALLISON MANAGEMENT SERVICES 325 CLEMATIS ST #202 WEST PALM BEACH, FL 33401

FEI Number: 06-1657728 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:

GELFAND, MICHAEL J 1555 PALM BEACH LAKES BLVD #1220 WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: PD

Name: AUGUSTYN, JULIE

Address: ALLISON MANAGEMENT, 325 CLEMATIS ST #202

City-St-Zip: WEST PALM BEACH, FL 33401

Title: VD

Name: WILSON, GRACE

Address: ALLISON MANAGEMENT, 325 CLEMATIS ST #202

City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD

Name: HUGHES, CHRISTOPHER

Address: ALLISON MANAGEMENT, 325 CLEMATIS ST #202

City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD

Name: BILLETER, GREGG

Address: ALLISON MANAGEMENT, 325 CLEMATIS ST #202

City-St-Zip: LAKE WORTH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: JULIE AUGUSTYN PD 04/29/2011