


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2008 8:00 am
Secretary of State

02-05-2008 90011 006 ****61.25

DOCUMENT # N02457

1. Entity Name
 PINEBROOK TOWNE HOUSE ASSOCIATION, INC.



Principal Place of Business
 11350 66TH STREET N STE 124
 LARGO, FL 33773 US

Mailing Address
 11350 66TH STREET N STE 124
 LARGO, FL 33773 US



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01232008 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
 59-2478096

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLIDAY ISLES ROBERT BABCOCK
 11350 66TH ST N STE 124
 LARGO, FL 33773

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	JAHREN, JERRY	
STREET ADDRESS	8470 BARDMOOR PLACE	
CITY-ST-ZIP	LARGO, FL 33777	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BANNON, KRISTEN	
STREET ADDRESS	6600 - 121ST AVE N #5	
CITY-ST-ZIP	LARGO, FL 33773	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MAJOR, ALBERT	
STREET ADDRESS	6761 - 121ST AVE N #F	
CITY-ST-ZIP	LARGO, FL 33773	
TITLE	SD	<input type="checkbox"/> Delete
NAME	GILBERT, JACQUELINE	
STREET ADDRESS	6710 121ST AVE N #11	
CITY-ST-ZIP	LARGO, FL 33773	
TITLE	D PD	<input type="checkbox"/> Delete
NAME	GUTHRIE, DEBORAH	
STREET ADDRESS	6681 121ST AVE N #4	
CITY-ST-ZIP	LARGO, FL 33773	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	STEVENSON, MATT	
STREET ADDRESS	6200 121ST AVENUE N #2	
CITY-ST-ZIP	LARGO, FL 33773	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Filson, ERIC	
STREET ADDRESS	6720-2 121ST AVE N.	
CITY-ST-ZIP	LARGO FL 33773	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: Deborah L. Guthrie DEBORAH L. GUTHRIE 1/24/2008 727-548-9402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #