

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03381

FILED
Mar 16, 2009
Secretary of State

Entity Name: PINELAND PARK HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6503 RUTH DR
PORT RICHEY, FL 34668 US

New Principal Place of Business:

3512 NORLAND CT
HOLIDAY, FL 34691 US

Current Mailing Address:

POB 471
PORT RICHEY, FL 34673 US

New Mailing Address:

FEI Number: 59-2482965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAULKENBERG, WAYNE
6503 RUTH DR
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

FALKENBERG, WAYNE
3512 NORLAND CT
HOLIDAY, FL 34691 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: WAYNE A. FALKENBERG

03/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FALKENBERG, WAYNE
Address: 6503 RUTH AVE
City-St-Zip: PORT RICHEY, FL 346681344 US

Title: VP () Delete
Name: LISI, MARCO
Address: PO BOX 6122
City-St-Zip: HUDSON, FL 346746127

Title: T () Delete
Name: HOLBEN, DOROTHY
Address: 11418 ROHRMAN DR
City-St-Zip: PORT RICHEY, FL 34668

Title: S () Delete
Name: LISI, GEORGETTE
Address: PO BOX 6122
City-St-Zip: HUDSON, FL 346746127 US

Title: D () Delete
Name: CAPON, LARRY
Address: 6519 CATHY DR
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: VANDYK, ANNA
Address: 6518 RUTH DR
City-St-Zip: PORT RICHEY, FL 34668

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FALKENBERG, WAYNE
Address: 3512 NORLAND CT
City-St-Zip: HOLIDAY, FL 34691 US

Title: VP (X) Change () Addition
Name: FALKENBERG, MARIANNE
Address: 3512 NORLAND CT
City-St-Zip: HOLIDAY, FL 34691

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BRECHER, CAROL
Address: 6514 RUTH DR
City-St-Zip: PORT RICHEY, FL 34668 US

Title: D (X) Change () Addition
Name: ENDICOTT, SALLY
Address: 6519 ELEANOR DR
City-St-Zip: PORT RICHEY, FL 34668

Title: D (X) Change () Addition
Name: VANDYK, WILLY
Address: 6518 RUTH DR
City-St-Zip: PORT RICHEY, FL 34668

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: MARIANNE FALKENBERG

VP

03/16/2009

Electronic Signature of Signing Officer or Director

Date